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STATE DOCUMENTS

# MONTANA STATE PLAN

for

## Hospital and Medical Facilities Construction

### 1967 Revision

DIVISION OF HOSPITAL AND MEDICAL FACILITIES

MONTANA STATE DEPARTMENT OF HEALTH

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## CHAPTER I

### GENERAL REQUIREMENTS





ANNUAL REVISION OF STATE PLAN  
(Hospital and Medical Facilities Construction Program)

A. DESIGNATION OF STATE AGENCY responsible for administering the State Plan:

1. AGENCY NAME

Montana State Department of Health

ADMINISTRATIVE UNIT

Division of Hospital and  
Medical Facilities

2. Has the organization of the State Agency  
been changed since the existing State Plan  
was approved?

☒ YES

☐ NO

(If "yes," attach chart showing organization of State Agency and  
relationship of the unit responsible for administering the State  
Plan to other units of State Agency.)

B. AUTHORITY OF THE STATE AGENCY:

Has any change been made in the authority of the State agency to carry out the  
provisions of the State Plan?

☐ YES

☒ NO

(If "yes," attach copy of legislation or directive which accomplished  
change).

C. DESIGNATION OF STATE ADVISORY COUNCIL:

Has any change been made in the membership of the State Advisory Council or  
the manner in which consultation services for rehabilitation is to be provided  
to the State Agency?

☐ YES

☒ NO

(If "yes," attach revised list of members)

D. METHODS OF ADMINISTRATION:

Do the methods of administration included in the approved State Plan reflect  
accurately the current or projected method of administering the State Plan?

☒ YES

☐ NO

(If "no," attach revised or additional pages)

E. STATE AGENCY REQUIREMENTS:

Have any changes been made in (1) State goals or policies, (2) methods of  
determining priority, (3) service area delineations, (4) bed need formula, or  
(5) standards for maintenance and operation of facilities?

☒ YES

☐ NO

(If "yes," attach revised or additional pages)

F. FEDERAL SHARE (Indicate below the percentage for each category.)

HOSPITALS AND PUBLIC HEALTH CENTERS	40 %	REHABILITATION FACILITIES	40 %
FACILITIES FOR LONG-TERM CARE	40 %	MODERNIZATION	40 %
DIAGNOSTIC OR TREATMENT CENTERS	40 %	VARIABLE RATE	
(Attach copy of factors used and table listing Federal share for the various areas of the State for each category)			

G. DATE OF PUBLIC NOTICE:

May 17, 1967

I hereby certify that the information above and attached statements, charts, maps, and tables are true and correct to the  
best of my knowledge and belief, and are an accurate presentation of the revised State Plan adopted by the State Agency.

SIGNATURE

NAME & TITLE (typed)

EFFECTIVE DATE OF REVISION

John S. Anderson, M.D.  
Executive Officer

July 1, 1966

## AUTHORITY OF STATE AGENCY

The enactment by the Montana Legislature of Chapters 269 and 270 of the 1947 Session Laws enabled the State of Montana to comply with all the requirements of the original Hospital Survey and Construction Act. Chapter 270, the Montana Hospital Survey and Construction Act, established the Board of Health as the sole agency for the administration of the plan, authorized the inventory and survey of existing hospital facilities, and provided for an Advisory Council.

It was necessary to amend the original State enabling law to cover the expanded program as provided by the Medical Facilities Survey and Construction Act of 1954. This was accomplished by Senate Bill No. 67, signed by the Governor March 4, 1955, included as Chapter 215 of the 1955 Montana Session Laws.

Governor Tim Babcock designated the State Board of Health as the sole agency to implement the provisions of Public Law 88-164, cited as the "Mental Retardation Facilities and Community Mental Health Centers Construction Act of 1963." The enabling legislation was provided by Chapter 77 of the 1965 Montana Session Laws. This also provided for the "Hospital and Medical Facilities Amendments of 1964," Public Law 88-443.

Chapter 269 of the 1947 Montana Session Laws provided for the licensing, inspection, and regulating of hospitals throughout the State. The Federal Act required that minimum standards for maintenance and operation be established for hospitals which receive Federal aid under the Act. The State Licensing Law, as passed, to comply with the Federal Act is intended to apply to all hospitals (except Federal) since minimum standards are equally desirable for all operating hospitals.

Chapter 78 of the 1965 Montana Session Laws amends the Licensing Law to include facilities for mental diseases and mental retardation. It also provides, in Section 69-2910, a hospital, medical and related facilities advisory council which shall consult and advise the board in matters of policy affecting administration of the Montana Hospital, Medical and Related Facility Survey and Construction Act and in the development of rules, regulations and standards provided under the Licensing Act.

Chapters 29 and 30, Revised Codes of Montana, 1947 Annotated, amendments as shown in the 1965 Cumulative Pocket Supplement, were included in their entirety in the 1966 Revision of the Montana State Plan for Hospital and Medical Facilities Construction and are not reproduced in this revision of the Plan. Copies of these Statutes will be furnished to interested parties on written request to the Montana State Board of Health.

EXCERPTS FROM THE REVISED CODES OF MONTANA,

1947 ANNOTATED, AMENDMENTS AS SHOWN IN 1965

CUMULATIVE POCKET SUPPLEMENT.

CHAPTER 30

69-3003. Administration--hospital, medical and related facility survey and construction. Except where another state agency is specifically designated by law, the state board of health of the state of Montana is hereby designated as the sole agency of the state of Montana to establish and administer any statewide plan for the construction, alteration, equipment, maintenance, or operation of any hospital, medical or related facilities for the provision of care, treatment, diagnosis, rehabilitation, training, or related services, which plan is now, or may hereafter be required as a condition to the eligibility for benefits under any federal law. The state board of health, in its discretion, is authorized to, for and on behalf of the state of Montana, enter into contracts and agreements with the United States or any officer, department or bureau thereof, relative to such statewide plans, and to do those things necessary or required to secure for the people of the state of Montana the benefit of such programs as will provide adequate medical and related facilities and services.

The board shall make an inventory of existing hospitals, medical and related facilities; survey the need for construction or alteration of hospitals, medical and related facilities; and develop and administer a state plan for the construction and alteration of public and other nonprofit hospitals, medical and related facilities.

CHAPTER 29

69-2910. Hospital, medical and related facilities advisory council. The governor shall appoint a hospital, medical, and related facilities advisory council to advise and consult with the board in carrying out the administration of this act and of the Montana Hospital, Medical and Related Facility Survey and Construction Act. The council shall consist of the executive officer of the state board of health (in various acts designated as "secretary" of said board) who shall serve as chairman ex officio, the state director of the department of public welfare, ex officio, the director of public institutions, ex officio, and representatives of nongovernmental organizations or groups, and of public agencies, concerned with the operation, construction, or utilization of hospital, medical and related facilities and representatives of consumers familiar with the need for the services provided by such facilities, with the number of members as are or may be required on said council as a condition of eligibility for benefits for hospital, medical and related facilities under any federal law. Each member shall hold office for a term of one (1) to three (3) years, as designated in the appointment, except that any member appointed



to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term, and the terms of office of the members shall expire, as designated at the time of appointment. In designating the duration of appointments, the governor shall endeavor to avoid expiration of more than one-third of the total appointments in any twelve month period. Council members while serving on the business of the council shall be entitled to receive ten dollars (\$10.00) per diem, and also their actual and necessary travel and subsistence expenses while so serving away from their place of residence. The council shall meet as frequently as the chairman deems necessary, but not less than once each year. Upon request by one-third or more of the members, it shall be the duty of the chairman to call a meeting of the council.



## MONTANA STATE BOARD OF HEALTH

The Montana State Board of Health was created by legislative action, signed into law March 15, 1901. Membership of the State Board of Health is detailed by law (Revised Codes of Montana, 1947, Title 69, Chapter 101):

"There is hereby created 'The State Board of Health of the State of Montana' . . . . which shall consist of seven (7) members, to be appointed by the governor, three (3) of whom shall have the degree of doctor of medicine, one (1) of whom shall have the degree of doctor of dental surgery, and three (3) of whom shall be lay persons, each of whom has demonstrated intelligent and active interest in the field of public health in Montana. For purposes of this act 'lay person' is hereby defined as any person who does not hold the degree of doctor of dental surgery or doctor of medicine."

R. J. Losleben, President  
Malta, Montana

Paul H. Bowden, D.D.S.  
Butte, Montana

George H. Gould, M.D.  
Kalispell, Montana

R. D. Knapp, M.D.  
Wolf Point, Montana

Mrs. O. H. Mann  
Missoula, Montana

Mrs. Richard T. Ellis  
Great Falls, Montana

Edwin C. Segard, M.D.  
Billings, Montana

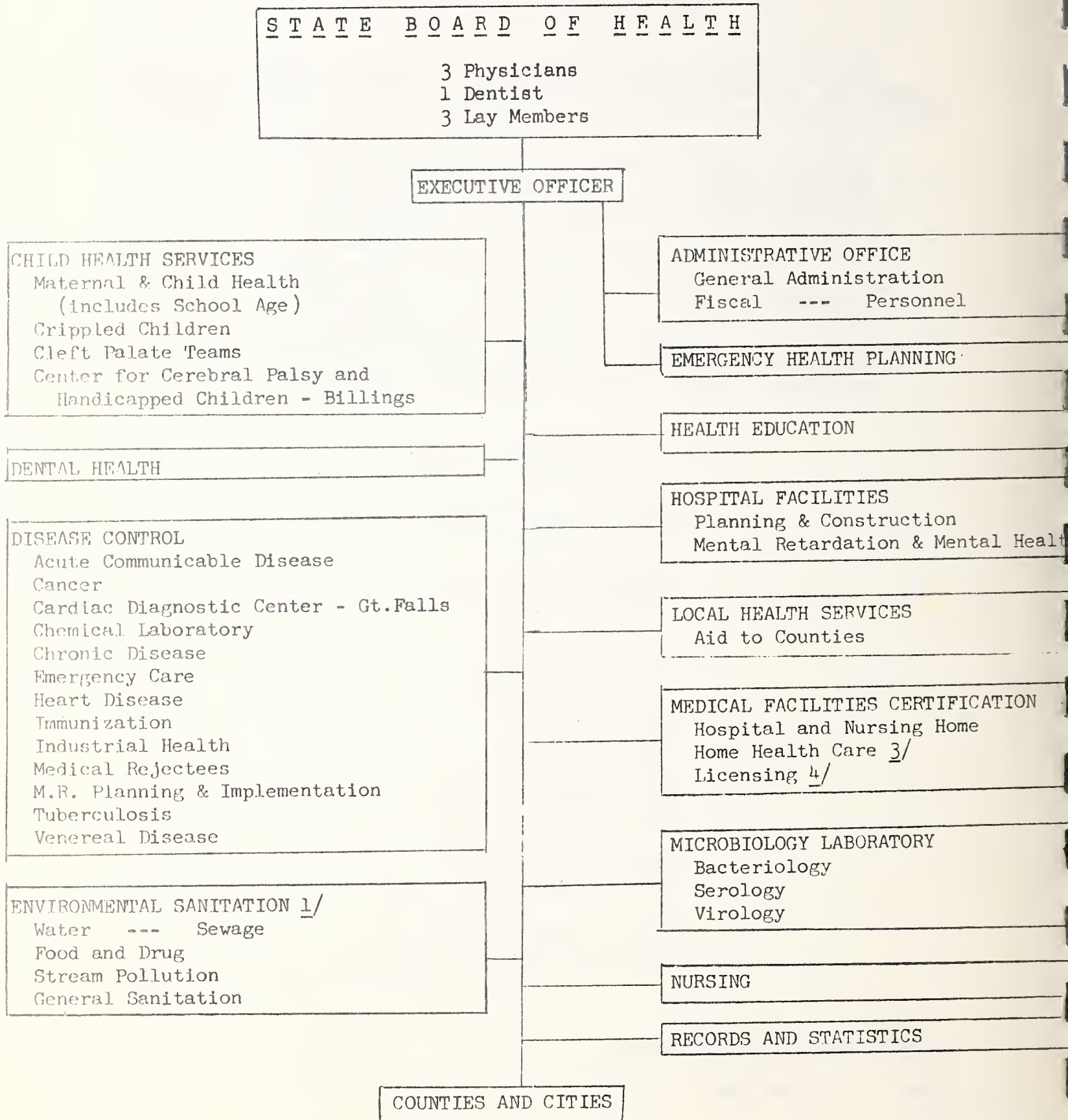
John S. Anderson, M.D.  
Secretary & Executive Officer

## DIVISION OF HOSPITAL FACILITIES

Robert J. Munzenrider, Director

MONTANA STATE BOARD OF HEALTH  
Helena, Montana

ORGANIZATIONAL CHART  
By Divisions and Major Functions



- 1/ Includes restaurants, motels, hotels, school construction, refrigerated lockers, food processing, sub-division, septic tank and cesspool disposal, etc.
- 2/ Includes alcohol and narcotic education.
- 3/ Also included under Nursing Division.
- 4/ Includes hospitals, nursing homes and homes for the aged.

# HOSPITAL, MEDICAL AND RELATED FACILITIES

## ADVISORY COUNCIL

### Name and Address

#### Government

John S. Anderson, M.D., M.P.H.  
2216 East 6th Avenue  
Helena, Montana

#### Occupation or Profession

Chairman, Ex Officio  
Executive Officer, State  
Board of Health

#### Representation

State Board of  
Health

W. J. Fouse  
State Dept. of Public Welfare  
10th and North Ewing  
Helena, Montana

Director, State Dept. of  
Public Welfare  
Ex Officio

Dept. of Public  
Welfare

Edwin G. Kellner  
620 North Warren  
Helena, Montana

Director, Dept. of Public  
Institutions  
Ex Officio

State Institutions

#### Non-Government

V. R. Powers 3/ 4/  
1211 Rose Brier Drive  
Missoula, Montana

Administrator  
Missoula Community  
Hospital

Montana Hospital  
Association

Eugene A. Lalonde 2/ 4/  
Sidney, Montana

Lawyer

M. E. Donovan 3/ 4/  
P. O. Box 1677  
Helena, Montana

Executive Director  
Montana Physicians'  
Service

Blue Shield

Leonard Kuffel, M.D. 2/ 5/  
18 Martha Court  
Missoula, Montana

Anesthesiologist

Montana Medical  
Association

Thomas McMaster 1/ 5/  
1109 Livingston Avenue  
Helena, Montana

Dairy Technologist

Montana Assoc.  
for Retarded  
Children

Bryce Hughett, M.D. 3/ 6/  
1117 Avenue F.  
Billings, Montana

Psychiatrist

Montana Medical  
Association

#### Consumers

Mrs. Helen Johnson 2/ 4/  
619 South Willson Avenue  
Bozeman, Montana

Real Estate  
Insurance

<u>Name and Address</u>	<u>Occupation or Profession</u>	<u>Representation</u>
<u>Consumers Contd.</u>		
Mrs. Stephen Birch <u>1/</u> <u>4/</u> 2625 Fourth Avenue South Great Falls, Montana	Housewife	
Hubert White <u>2/</u> <u>4/</u> 129 South Pine Townsend, Montana	Businessman	
F. B. Welsh <u>2/</u> <u>4/</u> 9 North 24th Billings, Montana	Insurance	
Miss Elizabeth Havnen <u>1/</u> <u>4/</u> 3415 2nd Avenue South Great Falls, Montana	Nursing Supervisor City-County Health Department	
W. Boyce Clarke <u>1/</u> <u>5/</u> 1705 Stower Miles City, Montana	Insurance	
A. W. Scribner <u>1/</u> <u>5/</u> 426 Monroe Helena, Montana	Attorney	
Ervin S. Thoreson <u>1/</u> <u>5/</u> 302 36 Street South Great Falls, Montana	Pharmacist	
Mrs. Thomas Payne <u>2/</u> <u>6/</u> 112 Pattee Creek Drive Missoula, Montana	Housewife (B. Sc., Nursing)	

Consultant

Jack C. Carver <u>7/</u> 508 Power Block Helena, Montana	Director, Division of Vocational Rehabilitation State Board of Education	Vocational Rehabilitation
--	--	------------------------------

- 1/ Term of Office: January 1, 1967 to January 1, 1970
- 2/ Term of Office: January 1, 1966 to January 1, 1968
- 3/ Term of Office: January 1, 1966 to January 1, 1969
- 4/ Appointed under P. L. 88-443, Hill-Harris
- 5/ Appointed under P. L. 88-164, Title I, Part C (Construction of Facilities for the Mentally Retarded.)
- 6/ Appointed under P. L. 88-164, Title II (Construction of Community Mental Health Centers.)
- 7/ Public Law 88-443 in Section 604, (a) (3) provides that the Advisory Council shall include a representative of a non-government organization, or group, or state agency concerned with rehabilitation, or provide for consultation with groups, organizations or agencies so concerned.



## METHODS OF ADMINISTRATION

### Preparation and Publication of the State Plan

1. The cut-off date for statistics for the bases of the State Plan preparation and modification shall be April 1 of each calendar year.
2. The State Plan shall be developed in consultation with other State Agencies, nongovernmental organizations or groups and of public agencies, concerned with the operation, construction, or utilization of hospitals and medical facilities.
3. The State Plan will be written, reviewed by the Hospital, Medical and Related Facilities Advisory Council and approved by the State Board of Health. A general description of the provisions included in the Plan will be published and a reasonable notice of a public hearing will be given, at which interested persons or organizations will be given an opportunity to be heard. The public hearing will be scheduled in conjunction with the Advisory Council meeting. The State Plan will be available for public examination for a period of at least 30 days.
4. The State Board of Health shall take steps to insure publication of a general description of the State Plan in newspapers of general circulation throughout the State.
5. The State Plan shall be submitted to the Surgeon General for review and approval prior to July 1 of each calendar year.
6. After approval of the State Plan by the Surgeon General, it shall be made available to those who would desire a copy.

### Establishment of the Project Construction Schedule

Subsequent to approval of the State Plan by the Surgeon General of the U. S. Public Health Service, the State Board of Health will develop a project construction schedule for the fiscal year covered by the Plan. Projects will be included in the project construction schedule giving consideration to the following factors:

1. The priority of the project as determined in accordance with the principles outlined in the State Plan for determination of need.
2. The intent of sponsoring agencies to begin construction within a reasonable length of time.
3. The ability of the sponsoring agency to meet the financial requirements for construction, maintenance, and operation of the proposed facility. Assurance must be given that sufficient funds are available for initial supplies, payrolls,

3. Contd.

etc. required to place the hospital in operation. In accordance with the Public Health Service Regulations, the sponsoring agency for a new project must present an operating budget to assure financial ability for the two-year period immediately following its completion. Assurance must be given by the sponsoring agency that the operating organization or method of operation has been determined, and that equipment lists for Group I, II, and III will be submitted to the Montana State Board of Health shortly after plans and specifications have been submitted, or within sixty days after awarding construction contracts.

4. The maintenance of an appropriate balance in the construction of various categories of facilities. The balance between categories in facilities need not be reflected in each Project Construction Schedule; however, construction which is scheduled under the program will reflect an appropriate balance between the various categories of facilities.
5. In cases of reclassification of a facility, or facilities, in a service area, or community within a service area, from "conforming" to "non-conforming," the facility so classified will be given a reasonable time, as determined by the State Board of Health, to signify its intention to bring the facility into conformance either through new construction, renovation or remodeling. In the interim period, no application for financial assistance from other sponsors in the service area, or community, will be considered for the replacement of the facility in question.
6. For long term care facilities, when the situation, on the basis of administrative staff review, indicates that a facility does not meet the intended criteria of the State Plan no application shall be approved until it has been decided by the Board of Health on its own merits. This would also apply to certifications for FHA.
7. The sponsoring agency for a long term care facility must show that it has a working relationship with an existing hospital.

If a project is removed from the Project Construction Schedule by the State Board of Health, the Schedule will be revised to include the next highest priority project which meets the requirements for inclusion. After the approval of the Schedule, a project will not be removed therefrom except when an applicant must be dropped for any of the following reasons:

1. Failure to submit required documents.
2. Failure to comply with the present rules and regulations,

2. Condt.

such as inability to meet the financial requirements or failure to prepare plans and specifications.

3. Voluntary withdrawal.

4. When final hospital construction costs are determined through opening of bids, and are found to exceed the estimated costs and the sponsor lacks adequate funds to meet their share of the costs, the project shall remain on the Schedule for the balance of the fiscal year, but for not less than an additional 120 days in order to secure additional time to obtain additional funds.

5. Projects removed from the Schedule may be reinstated upon demonstration by the sponsor that adequate funds are available in accordance with provisions of the State Plan.

The fact that a project is excluded from the Project Construction Schedule for any one of several reasons will not change the project priority rating, and such projects will be considered for inclusion in each succeeding Project Construction Schedule.

The total amount of Federal funds allocated to projects listed on the Construction Schedule from any one fiscal year will be limited by the Federal allotment to the State for that particular fiscal year.

Applications for Federal Assistance under Public Law 88-443 must be completed by each sponsor on the prescribed Public Health Service forms.

### Construction Standards

The Montana State Board of Health has issued minimum general standards for construction and equipment for new construction of hospitals and medical facilities. These meet all minimum standards as set forth in Subpart N (Appendix A) as amended in the PHS Regulations.

Until minimum standards for construction of medical facilities (other than homes for the aged) are promulgated by the Montana State Board of Health the minimum standards as set forth in Subpart N (Appendix A) PHS Regulations shall apply.

Copies of these standards will be made available to architects and sponsors involved in construction.

### Minimum Standards of Maintenance and Operation

Minimum standards for the maintenance and operation of hospitals and



related facilities providing **inpatient** care are promulgated by the Montana State Board of Health. These apply to all hospitals and long-term care facilities regardless of whether or not these received financial aid under the Federal Act. Standards promulgated by the State Board of Health are:

Montana Licensing Law and Standards for Hospitals and Related Institutions, adopted June 15, 1957. These are promulgated under authority of Chapter 269, 1947 Montana Session Laws, as amended (Section 69-2901 through 69-2918, Revised Codes of Montana, 1947 Annotated.)

Montana Licensing Law and Standards for Homes for the Aged, adopted November 7, 1959 and all amendments thereto. These standards are developed under the provisions of Chapter 192, 1947 Montana Session Laws, as amended (Section 69-2401 through 69-2406, Revised Codes of Montana, 1947 Annotated including amendments by Chapter 243, 1959 Montana Session Laws.) These standards were also adopted by reference under Chapter 162, 1965 Montana Session Laws.

The Licensing Program is under the Division of Medical Facilities Certification which is responsible for the licensing, inspection, and enforcement of the above standards. Copies of the official state standards and regulations for licensure of hospitals and nursing homes are distributed to all facilities in Montana and are available on request to the State Board of Health.

#### Inspection of Projects

1. When a request for payment of an installment is made, the State Board of Health will cause to be made an inspection of the project to determine that services have been rendered, work has been performed, and purchases have been made as claimed by the applicant and in accordance with the approved project application.
2. The State Board of Health will make such additional inspections as are deemed necessary.
3. Reports of each inspection will be retained in the files of the State Board of Health.
4. Files will be maintained on all correspondence incident to inspections of a project.

#### Construction Payments.

Requests for construction payments shall be submitted by applicants to the State Board of Health at the times prescribed by Section 53.130 of the Public Health Service Regulations, as amended. Under existing law the State is authorized to make payments of Federal funds to all types of eligible applicants. Federal funds shall be paid to the State Treasurer. The



State will promptly remit, or credit, any payments of Federal funds received by the State for payment to applicants for approved construction projects.

#### Maintenance of Personnel Standards of State Agency

The Medical Facilities Construction Program will be administered in accordance with the Merit System requirements as set forth in the PHS regulations, Subpart M, and Health Grants Manual, Part 14-1. A copy of the Montana Merit System Regulations is on file with the Public Health Service.

#### Fiscal and Accounting Procedures

The State Board of Health will comply with the provisions of Section 53.131 of the PHS Regulations by maintaining the necessary accounting records and controls, and requiring applicants for Federal funds to maintain adequate fiscal records and controls.

The State Board of Health agrees that it will retain on file all documents coming into its possession which relate to any expenditure under the Act as amended. In addition, the State Board of Health will take such steps as are necessary to assure that the applicants will retain all relevant and supporting documents and will establish suitable property inventory records covering all equipment of more than nominal value. The State Board of Health further agrees that it will retain the accounting records, controls and documents as described above for a period of at least one year upon its participation in the program, and will take necessary steps to assure that applicants retain such documents for a period of at least two years after the final payment of Federal funds.

#### Access to State Agency Records by the Comptroller General

The Surgeon General of the Public Health Service and the Comptroller General of the United States or his duly authorized representative shall have access for purposes of audit and examination to all program records maintained by the State Agency in accordance with established program requirements of the Surgeon General.

#### Federal Share of the Cost of Each Construction Project

The State Board of Health has adopted 40% as the rate of Federal participation for construction and modernization for all categories during the fiscal year, 1967.

#### Transfer of Allotments to Another State

The provisions of Section 53.92, Part 53 of the Public Health Service Regulations, are made a part of this plan.

## Transfer of Allotments for Modernization to Another Category Within the State

The provisions of Section 53.93, Part 53 of the Public Health Service Regulations, are made a part of this plan.

### Fair Hearings

Upon petition, the State Board of Health will provide an opportunity for a fair hearing before the State Board of Health to every applicant who has requested Federal aid for construction of any of the medical facilities included in the Act, and who is dissatisfied with any action of the State Board of Health regarding the application.

Actions of the State Board of Health which entitle applicants to a hearing include the following:

- 1) Denial of opportunity to make formal application.
- 2) Refusal to consider an application.
- 3) Rejection or disapproval of an application.

Appeals from decisions or actions of the State Board of Health must be made by the appellant, in writing, within thirty days of the date of the adverse decision by the State Board of Health.

The appellant will be notified, in writing, of the time and place of the hearing which will be determined by the State Board of Health and be reasonably convenient for the appellant.

The appellant is entitled to be represented by friends or counsel as he so desires. The appellant and other persons interested and concerned with the State Board of Health's decision are entitled to present pertinent evidence in the way desired, subject to reasonable procedures of admissibility and methods of presentation.

The decision of the State Board of Health will be made, in writing, within thirty days from the date of the hearing and will be based on the evidence presented at the hearing.

A record of the hearing will be made, and upon request of the appellant, will be made available for examination.

### Conflict in Interest

No full-time officer or employee of the State Board of Health, or any firm, organization, corporation, or partnership which such officer or employee owns, controls, or directs, shall receive funds from the applicant, directly or indirectly, in payment for services provided in connection with the planning, design, construction or equipping of any project under this Plan.

## Nondiscrimination Procedures

No Person or Persons will be denied admission to any facility constructed under this Plan because of race, creed, color, or national origin. Further, no professionally qualified person or persons will be denied staff privileges because of race, creed, color or national origin, nor will employees of the facility be discriminated against for these same reasons.

## Nondiscrimination in Construction Contracts

Each construction contract is subject to the condition that the grantee shall comply with the requirements of, and give the assurances required in Executive Order 11,114, June 22, 1963 (28 F.R. 6485), and the applicable rules, regulations and procedures prescribed pursuant thereto by the President's Committee on Equal Employment Opportunity (28 F.R. 9812).

## Assurances to Those Unable to Pay

Before a construction application for a facility under this Plan is approved, the State Board of Health shall obtain assurance from the applicant that the facility will furnish below cost, or without charge, a reasonable volume of services to persons unable to pay therefor.

## Change of Status of Facility

In accordance with Public Health Service Regulations, Section 53.133, the State agency shall promptly notify the Surgeon General in writing, if at any time within 20 years after the completion of construction, any hospital, diagnostic or treatment center, rehabilitation facility, or long-term care facility which received funds under the Federal Act is transferred to any person, agency, or organization not qualified to file an application under the Act or not approved as a transferee by the State agency; or, ceases to be a nonprofit hospital, nonprofit diagnostic or treatment center, nonprofit rehabilitation facility, or nonprofit long-term care facility as defined in the Federal Act.





## CHAPTER II

### GOALS AND GENERAL POLICY

## GOALS AND GENERAL POLICY

The State Plan as developed originally, and revised annually, is in accordance with the basic definitions, standards, and methods as outlined in the Public Health Service Act and Regulations, and adapted for planning purposes to meet the estimated needs in Montana. The Plan designates locations of medical installations, based upon a study and analysis of available information that will affect present and future trends in hospital and medical facilities requirements. From existing hospitals and the use people make of them, a determination is made regarding the need for new and/or additional facilities.

One of the most important cornerstones of good planning is a proper delineation of hospital service areas. If areas are not accurate geographic definitions of patient origin for the hospitals and medical facilities in the areas, even the application of utilization formulas will not give an accurate picture of the needs of these areas.

In the light of past experience, the hospital service areas for the State of Montana have been drawn and grouped around the trade and transportation patterns, natural geographic boundaries, and highways and railroads, to reflect more accurately the flow of patients from outlying areas to the hospitals and medical facilities in the rural and urban areas and to provide areas large enough to support these facilities with adequate basic services.

While a number of small hospitals are needed to care for the more isolated areas of the State, it must be recognized that the smaller hospital cannot give complete care to a number of its patients due to its necessarily limited services. It is therefore recommended, that where bed need exists, that new bed construction go to an existing facility and that the larger hospitals extend their services so that they may offer complete general hospital care. This complete general hospital care, recommended for hospitals over 75 beds, should include not only normal services, but some of the aspects of rehabilitation, acute psychiatric, long-term care facilities, organized outpatient care and, perhaps, even facilities for Public Health workers.

It is recommended that the smaller hospitals in a service area be affiliated with the area, or regional, hospital as closely as possible so that patient care can be carried out at the highest standards of care and as efficiently as possible. Also long-term care facilities should have an established procedure for the transfer of a patient to a hospital without undue delay when such transfer is determined necessary by the attending physician, or in case of an illness.

The State Agency will continue to pursue a policy of close cooperation with all agencies, planning groups and other interested parties in developing the State Plan. While there are no organized local planning councils in Montana, local community groups are encouraged to plan for hospital and medical facilities on a community and area basis.

Governor Tim Babcock, in May 1964, designated the Montana State Board of Health as the Mental Retardation Planning Agency for Montana. Mary E. Soules, M. D., M.P.H., Director of the Division of Disease Control, State Board of Health, was named director of this mental retardation planning program by John S. Anderson, M. D., M.P.H., Executive Officer of the State Board of Health, and Mrs. Maxine S. Homer, Health Education Consultant, was named the coordinator. Dr. Anderson also named Robert J. Munzenrider, Director of Hospital Facilities, to be in charge of the construction phase of the program.

The Governor, in 1963, directed the state mental health authority to develop a comprehensive mental health plan for Montana, and the State Board of Health to administer the construction phase of the Federal Community Mental Health Centers Act.

The Executive Officer and various division directors of the State Board of Health have participated in a major degree in the formulations of the committees for mental health and mental retardation. Since the State Board of Health has been administering the Hill-Burton Program in Montana since 1947, there is a correlation between the three construction programs.

Because Montana has neither a medical school nor a teaching hospital, it is not possible to participate in the Health Professions Educational Assistance Act established under the authority of Public Law 88-129. This act provides for Federal assistance with the cost of the construction of schools of medicine, osteopathy, pharmacy, dentistry, optometry, podiatry, public health and teaching hospitals affiliated with medical and osteopathic schools.

Public Law 88-581, the Nurse Training Act, provides Federal construction grants to assist with the cost of construction schools of nursing. The State Board of Health will assist interested groups in every way possible in seeking aid in providing these facilities, if needed.

The Hospital and Medical Facilities Amendments of 1964, Public Law 88-443, provide greater uniformity, on a nationwide basis in the methods for surveying and evaluating existing facilities and beds. This is more fully described under the heading of "Plant Rating Techniques." While recognizing the need for greater standardization in the survey criteria, the Public Health Service, has left open the way to modify rigid standardization on the basis of experienced judgment.

Experience has demonstrated that an available hospital bed will be a used bed. Experience has also demonstrated that almost regardless of the imbalances and inefficiencies built into a hospital, it will function, not efficiently nor economically, but the personnel will manage to function in it. Also, the Board of a hospital, its administrator, and the community they serve have as their objective a complete hospital able to meet any problem presented by the patient who comes to them. Another objective of almost every hospital is to qualify for the numerous accreditations and approvals given to hospitals which meet the standards established for their recognition. These objectives are commendable. An empty hospital bed is an expensive bed because of wasted facilities and personnel. Also,



a hospital bed undeservedly occupied is even more wasteful.

Statistical information required in preparation of a State Plan when applied to the determination of need for facilities will yet leave considerable area for judgment. The Public Health Service developed a rather simple formula for determining hospital bed needs, at the same time allowing for modification dictated by judgment. The formula is based on three factors; that is, population served, patient days rendered, and the projected population.

The economics and size of a hospital and cost of construction must also be considered. The small hospitals in the more isolated areas present problems in design particularly in the services that are to be offered which of necessity must be limited. In the larger communities having two or more hospitals in need of modernization or replacement, consideration should be given to the construction of a single hospital which would provide more complete services to the patient.

Another matter of concern pertains to the duplication of expensive equipment for limited use such as cobalt vaults, deep-ray therapy, highly specialized psychiatric items, etc. Similar expenditures should be carefully restricted among those institutions affording maximum use and greatest community benefits.

Specific policies for guidance in the allocation of Federal grants that are to be observed are as follows:

1. Applications for construction grants from general hospitals will be considered in the order of (1) modernization, to reclaim otherwise "non-conforming" beds by (a) renovation, (b) replacement; (2) preference to medical and surgical over beds of obstetrical and pediatric services where the latter are operating at low occupancy.
2. No project to increase bed capacity will be approved for any institution having a substantial unmet need for modernization prior to submission and approval of plans to meet such needs.
3. Where an institution is functioning in a structure of inadequate capacity, obsolete arrangement and/or otherwise non-conforming rating, and can provide better service in a new plant, total replacement will be favored over a project for modernization of the existing structure, provided the latter will be abandoned as to its original purpose.
4. No new general hospitals, other than replacements of obsolete facilities, will be considered eligible pending the succeeding revision of the State Plan, unless an applicant can demonstrate that the area for which the proposed hospital is planned is not nor can be served by existing hospitals.



5. If two or more hospitals qualify equally under the standards, then factors concerning each, such as extent of community service offered, provision of ancillary facilities, nature and qualifications of staff, net additional beds, departmental rate of occupancy, etc. shall all be taken into consideration.
6. In the long-term care category, no application or construction of a sub-unit to a general hospital will be considered for less than 10 beds. Applications for long-term care facilities which are not sub-units of a general hospital must provide for 25 or more beds.
7. To receive consideration as a Chronic Disease Hospital facility, the applicant must demonstrate that the proposed project will provide organized programs of specialized rehabilitative services for the care of chronically ill patients. The facility shall provide a minimum of 25 beds and be operated as a part of a general hospital of 100 or more beds, except in unusual circumstances. The applicant shall demonstrate that there is active community interest in facilities and services for the diagnosis, treatment, care and rehabilitation of the chronically ill, that there are existing outlet facilities, including nursing homes and custodial institutions for the aged, and programs and services for the chronically ill patients requiring long-term care.

Chapter III of this Revision of the State Plan establishes a priority sequence for the construction and modernization of hospitals. Applications received will be processed on the basis of conformance with the State Plan, area priority and the availability of Federal funds.

Applications, in order to be considered, must be submitted on current forms of "Application for Project Construction" supplied on request to the State Board of Health. These must be complete with supporting material as outlined in the instructions for completing the application. The submission of an application under this Revision of the State Plan, if not acted upon due to insufficient Federal funds, shall not be construed by the applicant as establishing a priority under subsequent revisions of the State Plan.

The "Inventory of Inpatient Facilities" in the long-term care category of this Plan (Chapter IV), as in the previous revisions of the Plan, lists only those facilities rendering skilled nursing care and licensed as nursing homes by the State Board of Health. It does not include homes for the aged which provide primarily domiciliary care and/or personal care services. Therefore, this Plan reflects only the long-term care bed needs (nursing homes providing skilled nursing care) and does not take into account other facilities required to care for the aged.



## CHAPTER III

### PRIORITY AND SERVICE AREAS

## 1. METHOD OF DETERMINING PRIORITIES

The number of beds for acute and long-term illness required to provide adequate service to each planning area has been determined in accordance with Section 53.11 of the Public Health Service Regulations.

In determining the priorities of projects to be recommended for Federal grants-in-aid, the State Board of Health has considered both those projects initially approved under the program and facilities under construction without federal financial assistance as existing facilities.

### HOSPITALS

The Federal Regulations define "hospital" as general, tuberculosis, mental, and other types of hospitals, and related facilities, such as intensive, intermediate, and self-care nursing units, laboratories, outpatient departments, nurses' home facilities (and prior to July 1, 1965, nurses' training facilities) and central service facilities operated in connection with hospitals; but not institutions furnishing primarily domiciliary care. The term "hospital" shall be restricted to institutions providing community services for inpatient medical or surgical care of the sick and injured which includes obstetrics.

A general hospital is defined as any hospital for short-term inpatient medical or surgical care of illness or injury including obstetrics.

### LONG-TERM CARE

A facility for long-term care is defined as one providing community service for inpatient care for convalescent or chronic disease patients who require skilled nursing care and related medical services.

1. Which is a hospital (other than a hospital primarily for the care and treatment of mentally ill or tuberculosis patients) or is operated in connection with a hospital, or
2. In which such nursing care and medical services are prescribed by, or are performed under the general direction of, persons licensed to practice medicine or surgery in the State. Institutions furnishing primarily domiciliary care are not included.

"Chronic disease hospitals" and "nursing homes" constitute "facilities for long-term care."

The priority ranking as applied to individual service areas is based on the range of percentage of needs met for acute and long-term facilities. This priority of projects has been developed in accordance with Section 53.81 to 53.87 inclusive of the Public Health Service Regulations. These rankings apply to both new construction and modernization.

<u>PRIORITY</u>	<u>GENERAL HOSPITALS</u>	<u>LONG-TERM FACILITIES</u>
A	0 - 25%	0 - 25%
B	26 - 50%	26 - 50%
C	51 - 75%	51 - 75%
D	76 - 99%	76 - 99%
E	100%	100%



## DIAGNOSTIC AND TREATMENT CENTERS

Section 53.1 (g) of the Public Health Service Regulations defines a Diagnostic and Treatment Center as "A facility providing community service for the diagnosis and treatment of ambulatory patients (out-patients), which is operated in connection with a hospital, or in which patient care is under the professional supervision of persons licensed to practice medicine or surgery in the State, or, in the case of dental diagnosis or treatment, under the professional supervision of persons licensed to practice dentistry in the State. This includes outpatient departments and clinics of public or nonprofit hospitals." For purposes of planning adequate services, it is accepted that the basic minimum facility to be classified as a Diagnostic and Treatment Center must include a clinical laboratory and X-ray.

It is recognized that every physician's office is primarily a diagnostic or diagnostic and treatment center which may be adequate for the need of many patients, depending on the nature and seriousness of the illness. However, the need for and use of more complicated modern equipment for exact diagnosis is becoming increasingly more important. Exact information is not available regarding the extent to which basic services are available in the physicians' offices throughout the State since they were not included in the inventory of existing centers. Such services will, however, be taken into consideration in planning new facilities.

In Montana most of the population is concentrated in the urban centers with considerable distance between the smaller towns. Because of the sparsely populated rural areas, it is felt that the general hospital service areas are suitable for consideration of available and needed diagnostic and treatment services. There are existing acceptable community hospitals in all areas where basic X-ray and laboratory services are available for outpatient use on an unorganized basis. Such facilities are not included in the Inventory of Diagnostic or Treatment Centers as giving "significant" service since complete statistics are not available, and "significant" is a relative measure depending on the demand for service. However, since many of the rural hospitals are new, their facilities appear to be adequate for basic services. Other services are referred to the larger hospitals. The hospitals with unorganized facilities will be considered when planning for additional services.

There are nine general hospitals in intermediate hospital service areas which have acceptable organized outpatient clinics. Seven of these facilities offer therapeutic X-ray service.

Section 53.51 of the Public Health Service Regulations provides that diagnostic and treatment centers shall be planned in sufficient number to make at least the basic minimum services readily available to all persons in the State. Provision of the basic minimum services requires facilities for examination of patients by a physician or a dentist, and the provision of clinical laboratory and diagnostic X-ray services.

In accordance with Section 53.52 of the Public Health Service Regulations, diagnostic and treatment centers are to be distributed to facilitate the necessary relationship between hospitals and diagnostic or treatment centers. The diagnostic and treatment centers are planned in the same areas used for distribution of general hospitals and facilities for long-term care.

In determining the need for additional facilities for diagnostic or treatment services special consideration will be given to areas in which there is a shortage of services provided by private physicians and dentists.

Section 53.84 of the Public Health Service Regulations states that for new construction the priority of diagnostic and treatment centers, projects shall be determined on the basis of relative need for additional diagnostic or treatment services in the area to be served by the project taking into account existing available services and their utilization.

It is recognized that there may be a need for diagnostic or treatment centers in outlying areas of the State; however, no specific areas are designated in this plan. Basic considerations used in determining priority factors are as follows:

- A. The availability of basic diagnostic and treatment centers in hospitals through the state.
- B. The extent to which services are available in local physicians' and dentists' offices.
- C. The extension of laboratory, pathological, and X-ray services of the larger hospitals to the smaller hospitals and local physicians.
- D. The availability of professional staff in the urban centers.
- E. The ability of the larger hospitals to finance and operate multi-service centers.

Relative need will be determined within the following general categories:

Group A - Service areas with no suitable diagnostic and treatment facilities.

Group B - Intermediate areas with a hospital which needs an acceptable outpatient department.

Group C - General hospitals in need of additional outpatient facilities for expanded and/ or additional services.

Group D - Areas where no additional organized services are needed.

Prior to approval of any application, need for the facility must be established by supporting information covering all existing diagnostic and treatment services (including those in private offices) available in the communities and justification for additional facilities. Applications for construction projects will be considered in order of their relative priority group.

As other needs develop, a more detailed priority schedule can be developed on an area or regional basis.



For modernization, the priority is determined by the ratio of existing conforming outpatient facilities in such areas. On this basis, the priority ranking is:

<u>PRIORITY</u>	<u>PERCENT NEED MET</u>
A	0 - 25%
B	26 - 50%
C	51 - 75%
D	76 - 99%
E	100%

#### TUBERCULOSIS HOSPITALS

The Public Health Service Regulations in Section 53.21 state that the number of beds required to provide adequate hospital services for tuberculosis patients shall be determined:

- (a) In relation to the development of outpatient and community based programs and not as isolated inpatient programs; and,
- (b) On an estimated average occupancy rate of at least 80 percent of the current years existing beds, except where a lower rate is justified by the State Agency.

The State Pulmonary Disease Hospital (formerly the Montana State Tuberculosis Sanitarium) at Galen has 245 beds in operation with an occupancy rate of 60.7 percent. This occupancy rate includes patients with silicosis and chronic chest diseases as well as tuberculosis patients. Modern treatment techniques and medicines combined with an efficient program of early detection have greatly reduced incidence of severity and length of a patient's hospital stay.

The reportable cases of active and probably active tuberculosis in Montana in 1964 and 1965 were 93 and 111 respectively. On the basis of 245 beds, the available beds per case are 2.63 for 1964 and 2.21 for 1965. In view of this, the State Board of Health does not anticipate a need for additional facilities. Therefore, no priority system for the expenditure of Federal funds for this category has been prepared and the relative need report has been omitted.

#### MENTAL HEALTH FACILITIES

The Public Health Service Regulations, Section 53.31, state that the State Plan developed under the Community Mental Health Centers Act, Public Law 88-164, and regulations thereunder shall constitute that portion of the plan for mental health services, beds and facilities required under the Federal Act (Hill-Burton program).

Public Law 88-164 contains non-duplication provisions for the construction of Mental Health Centers and Facilities for the Mentally Retarded. Hill-Burton funds may therefore not be used to assist in constructing a community mental health center project, or a portion thereof, as described in the legislation, within the State when funds are available for such a project from the State's allotment under Public Law 88-164. Instances will occur,

however, where funds are not available for mental health facilities projects under Public Law 88-164 and the commitment of Hill-Burton funds to such a project by the approval of a Part I of the application may be legal and appropriate.

### PUBLIC HEALTH CENTERS

A public health center is defined as a publicly owned facility utilized by a local health unit for the provision of public health services, including related publicly owned facilities such as laboratories, clinics, and administrative offices operated in connection with public health centers.

A local health unit is a single county, city, county-city, or local district unit where the primary function of the State district unit is the direct provision of public health services to the population under its jurisdiction.

The Public Health Service Regulations state that the number of public health centers to be planned in the State shall be adequate to meet the needs of the people of the State. The need shall be determined after consultation with the State Board of Health and with local health departments where such departments are operating independent units. The general method of distribution of public health centers throughout the State shall conform to the plan of organization of local health units within the State.

Highest priority in this category will be given to the provision of facilities for local health units serving rural communities and communities with relatively small financial resources. Each application for construction of a public health center or local health office will be evaluated as to staffing and program to be provided.

### REHABILITATION FACILITIES

The Public Health Service Regulations, in Section 53.1, (h) define a rehabilitation facility as:

- (1) A facility providing community service which is operated for the primary purpose of assisting in the rehabilitation of disabled persons through an integrated program under competent professional supervision of (i) medical evaluation and services, and (ii) psychological, social, or vocational evaluation and services. The major portion of the required evaluation and services must be furnished within the facility; and the facility must be operated either in connection with a hospital or as a facility in which all medical and related health services are prescribed by, or are under the general direction of persons licensed to practice medicine or surgery in the State.
- (2) For the purpose of this paragraph:
  - (i) An integrated program brings together as a team specialized personnel from the (a) medical, and (b) psychological, social, or vocational areas for the purpose of pooling information, interpretations and opinions for the development of a rehabilitation plan of services in which the disabled individual is viewed as a whole. When members of the team contribute to the



diagnosis and treatment of illness, their contributions must be coordinated under medical responsibility. These integrated services may be provided in a facility to care for many types of disabilities or a single type of disability.

- (ii) A disabled person is an individual who has a physical or mental condition which, to a material degree, limits, contributes to limiting, or if not corrected, will probably result in limiting, the individual's performance or activities to the extent of constituting a substantial physical, mental, or vocational handicap.
- (iii) Medical service, in the case of a rehabilitation facility operated in connection with a hospital, means a service under the direct personal supervision of a medical director, varied and extensive availability of specialized consultant, physical and occupational therapy department and occupational therapy services, and medical evaluation.
- (iv) Medical service, in the case of a rehabilitation facility not operated in connection with a hospital, means medical supervision, availability by agreement of medical consultant, and evaluation and services suitable to the needs of the disabled persons to be served.
- (v) Social service means evaluation and services by a qualified social worker in amounts and variety appropriate to the rehabilitation needs of the disabled persons to be served.
- (vii) Vocational service, in the case of a rehabilitation facility operated in connection with a hospital, means evaluation and services by a qualified vocational rehabilitation counselor in amounts and variety appropriate to the rehabilitation needs of the disabled persons to be served.
- (viii) Vocational service, in the case of a rehabilitation facility not operated in connection with a hospital, means those vocational services required in hospitals plus a variety of vocational services appropriate to the program and the persons to be served, such as prevocational exploration, work evaluation and vocational training.

The Public Health Service Regulations in Section 53.61 state:

"(a) Rehabilitation facilities shall be planned by each state so that all persons in the State shall have access to integrated rehabilitation services for all types of disabilities. The facility or facilities may be programmed in the State or by joint planning with one or more other States to serve the residents of such States. In determining the number of rehabilitation facilities and services needed, the State shall consider such factors as the particular needs of the population to be served and the scope and nature of service of the existing and proposed facilities."

Section 53.62 of the Public Health Service Regulations states:

"In determining the need for additional rehabilitation services as a basis for distribution of rehabilitation facilities, consideration shall be given to (a) rehabilitation services provided in existing facilities, avoiding duplication and overlapping of services; and (b) availability of rehabilitation services to people in all geographical areas."

The distribution of rehabilitation facilities is programmed on a state-wide basis, the number, size, type and location depending upon consideration of the following factors:

- (a) Availability of medical, para-medical and other professional or trained personnel to provide the necessary evaluation and services.
- (b) The extent to which various types of disabilities will be provided for.
- (c) The extent to which the facility will be available for teaching purposes.

#### PRIORITY

The Public Health Service Regulations, in Section 53.85 state:

"Priority shall be given to rehabilitation facility projects in the order of importance as given below taking into consideration existing rehabilitation services in the community and the need for additional services in the community.

- (a) Facilities operated in connection with a university teaching hospital which will provide an integrated program of medical, psychological, social, and vocational evaluation and services under competent supervision.
- (b) Facilities offering rehabilitation services for multiple disabilities in hospitals and medical facilities capable of sustaining an organized department of physical medicine and rehabilitation.
- (c) All other rehabilitation facilities."

While Montana does not have a medical school, or a university teaching hospital, several units of the Montana University System do provide training of para-medical and other professional personnel. Applications for rehabilitation facilities will be considered for Butte, Havre, Helena, Kalispell, Miles City and Missoula.

Prior to approval of any application, need for the facility must be established by supporting information covering all existing rehabilitation services in the community to be served and justification for the additional facility desired.



The 1965 Amendments to the Vocational Rehabilitation Act authorize Federal funds to help construct new rehabilitation centers and workshops. It also assists in the acquisition of existing buildings, and the expansion, remodeling, alteration, and renovation of rehabilitation facilities and workshops. Such projects may also include assistance with the costs of initial equipment and the acquisition of land. This program is administered in Montana by the Division of Vocational Rehabilitation of the State Board of Education.

The State Board of Health will cooperate with the Division of Vocational Rehabilitation in coordinating their program with the Hill-Burton program.

## 2. SERVICE AREAS

(a) Service areas for planning have been established on the basis of socio-economic factors, trade areas, transportation systems including time-distance factors, geographic features and existing patterns of medical care. Area boundaries do not in all cases coincide with political areas.

This revision establishes thirty-six (36) service areas for planning general hospital, long-term care, and diagnostic and treatment facilities. These are designated as rural and intermediate areas, there being twenty-nine (29) rural areas and seven (7) intermediate areas.

The original State Plan, in 1948, provided for twenty-four (24) rural areas and six (6) intermediate areas. At that time, an intermediate area was required by Federal Regulations to have a total population of at least 25,000 and upon completion of the construction program under the State Plan to have at least one general hospital with a complement of 100 or more beds. To meet the population requirements for an intermediate area, it was necessary to combine several counties without regard to medical care patterns. This revision takes these inadequacies in account.

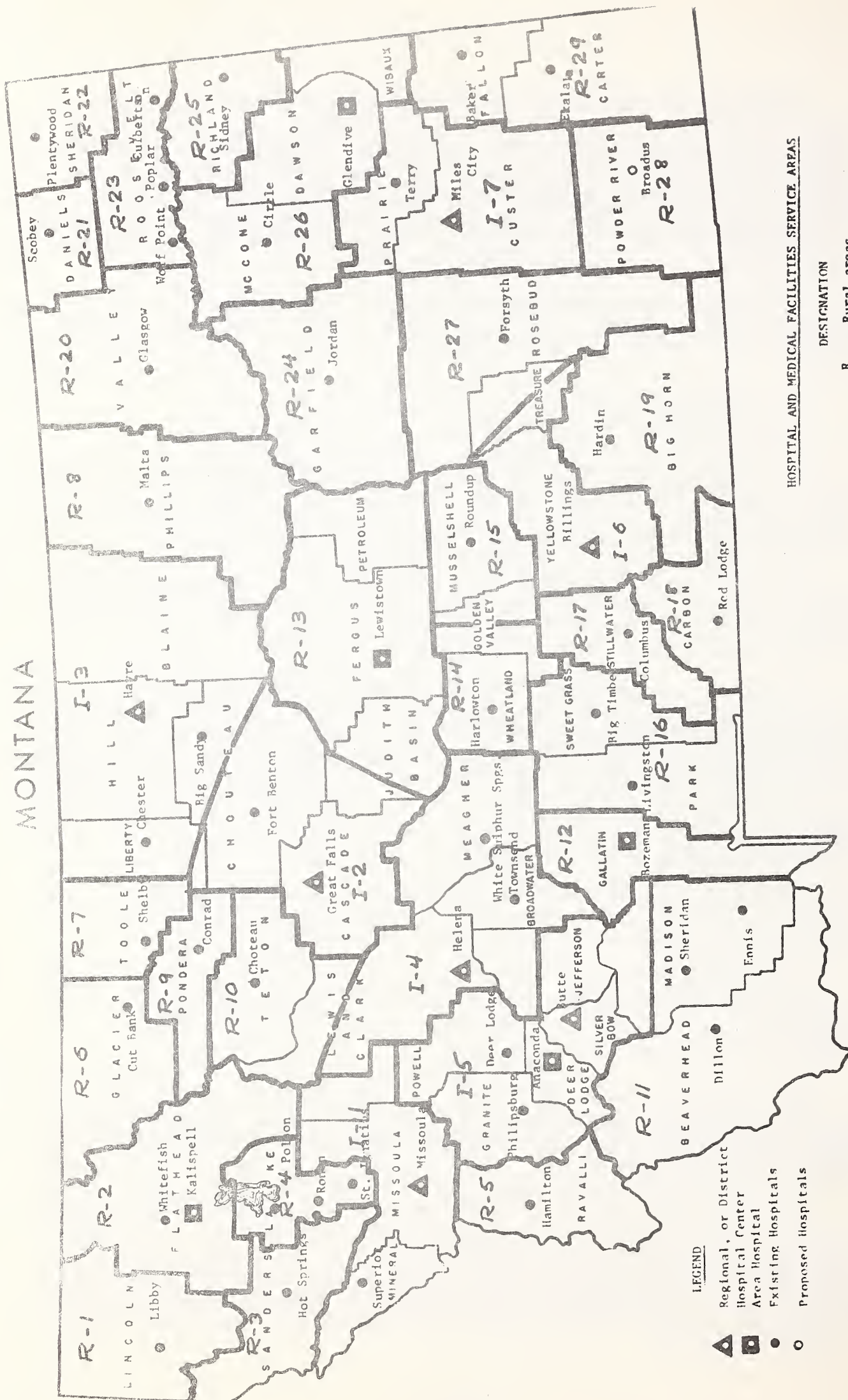
The State Board of Health will continue to study area boundaries and propose changes when needed to accurately reflect shifts in population, new transportation arteries and other significant factors.

(b) The service areas for Long-Term Care are the same as for General Hospitals and for Diagnostic or Treatment Facilities; however, political organization requires planning for Public Health Centers by separate counties or by city-county combinations.

(c) Tuberculosis Hospitals are on a Statewide basis. This has also been true for Mental Facilities; however, these facilities are now being planned on a Regional basis. Rehabilitation facilities are also being planned on a Regional basis.

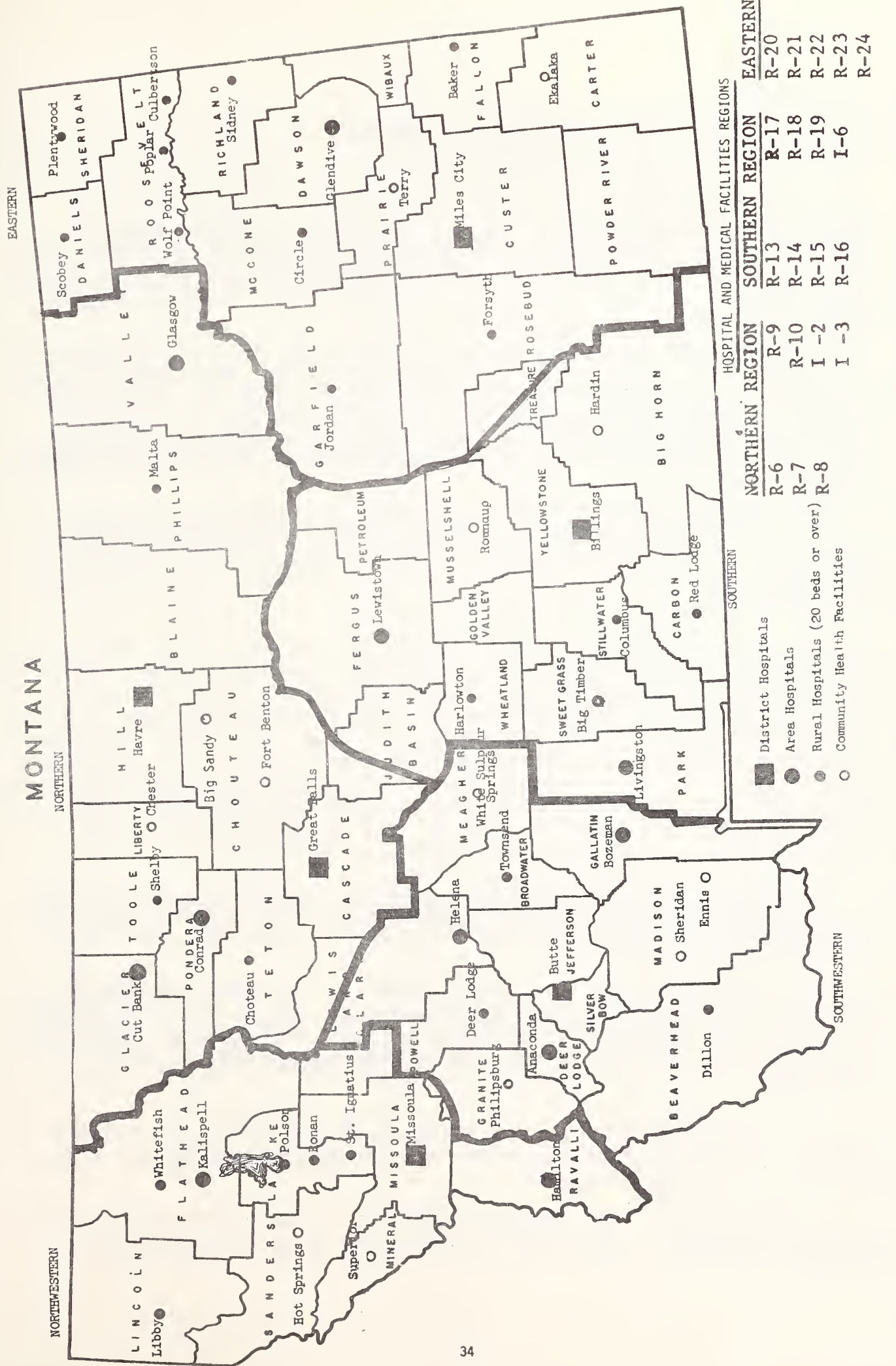
(d) The General Hospital, Long-Term care and Diagnostic or Treatment Facilities Service Areas are shown on the map on Page . In addition to these, the state has been divided into Regions for purposes of planning total health and related facilities. These Regions, with minor boundary adjustments, are also used for the planning of community Mental Health Centers and for Facilities for the Mentally Retarded. The Regional Map is shown on Page 29.

# MONTANA



HOSPITAL AND MEDICAL FACILITIES SERVICE AREAS





## PLANT RATING TECHNIC

For each hospital there is on file a Summary Worksheet, the data for which is taken from checklists corresponding with the breakdown on the Inventories: Parts A and B as evaluation of complete buildings, Part C as a measure of conforming and nonconforming beds in individual nursing units, and Part D as a measure of selected but essential service departments.

Part A, in a sense, reflects the "suitable" and "unsuitable" ratings of the past. Each consecutive addition (building, wing, or unit) of the hospital is rated as to whether it is "obviously unsuitable for hospital and medical purposes." The emphasis is upon meeting fire-resistive standards, failing which that unity of the hospital and all its beds are rated nonconforming.

Part B reflects safety of structure. Scoring is arranged so that buildings with certain combinations of deficiencies are considered nonconforming. In such cases, all beds in the affected unit are classified as nonconforming.

Assuming the particular building unit has not been disqualified under Part A, the nursing units per se are then examined to determine the suitability of individual patient rooms. All beds in any room that fail to meet criteria, all of which are given equal weight, are rated nonconforming. The disqualifications include: (1) lack of a nurse's call device available to each bed, (2) inadequate floor area per bed, (3) lack of windows, (4) lack of direct access to corridor, (5) opening onto corridor less than 7 feet wide, (6) lack of access to elevator, (7) below grade level, (8) lack of access to nurses' station or utility room, and (9) lack of access to toilet, bedpan, bath, or handwashing facilities.

In approaching this particular evaluation, the new definition of bed capacity is used and not necessarily the hospital's own count of beds nor the licensed bed figure.

Part D evaluates key service departments to determine deficiencies in physical plant which affect department functions. Where the survey proved that the service departments are "nonconforming", fifty percent of all beds found conforming under the three prior evaluations are thereby listed nonconforming.

The purpose of the plant evaluation is to establish a uniform basis among the states and relative need in the various areas within each State as a basis for priority ranking.

Modernization is the obvious solution for correcting deficiencies in service departments. This becomes an important factor in determination of priority.

## POPULATION

The Public Health Service Regulations require that the latest figures of civilian population, certified by the Federal Department of Commerce, be used for planning purposes and that such population be distributed among the various areas. This also applies to projected population.

According to the U. S. Bureau of Census, Series P-25, No. 324 dated January 20, 1966, the provisional estimate of civilian population for Montana as of July 1, 1965 is 696,000.

The projected civilian population for Montana as of 1971 is shown as 753,000 in the U. S. Bureau of Census illustrative projections in their Series P-25, No. 326, dated February 7, 1966.

The U. S. Bureau of Census provisional estimates of population aged 65 and over as of 1971 as given in their Series P-25, No. 326, dated February 7, 1966 for Montana is also 67,000.

Population Estimates by Region and Service Area and Population Estimates by County are shown in the accompanying tables.



POPULATION ESTIMATES BY REGION AND SERVICE AREA

<u>Region and Area</u>	<u>County</u>	<u>Population</u>	<u>Aged 65 and Over Percent</u>	<u>Number</u>	<u>Projected 1971 Popu- lation</u>	<u>65 and Over</u>
<u>Northwestern</u>		<u>130,300</u>		<u>13,906</u>	<u>141,200</u>	<u>13,906</u>
R-1	Lincoln	13,500	7.3	983	17,400	983
R-2	Flathead	34,200	11.4	3,890	35,000	3,890
R-3	Sanders	6,900	13.3	918	6,500	918
R-4	Lake	13,400	13.3	1,780	11,900	1,780
R-5	Ravalli	12,400	14.6	1,810	13,000	1,810
I-1	Missoula	46,200	9.2	4,242	52,300	4,242
	Mineral	3,200	7.3	234	4,500	234
	Powell (Part)	500	9.8	49	600	49
		<u>49,900</u>		<u>4,525</u>	<u>57,400</u>	<u>4,525</u>
<u>Northern</u>		<u>159,200</u>		<u>13,111</u>	<u>177,100</u>	<u>13,111</u>
R-6	Glacier	12,600	5.9	742	13,200	742
R-7	Toole	7,900	7.8	615	8,400	615
R-8	Phillips	6,000	13.2	790	5,400	790
R-9	Pondera	7,600	8.3	631	8,100	631
R-10	Teton	7,200	10.0	719	6,900	719
	Lewis and Clark	900	10.3	93	900	93
	(Part)	<u>8,100</u>		<u>812</u>	<u>7,800</u>	<u>812</u>
I-2	Cascade	78,900	7.7	6,065	93,400	6,065
	Chouteau (Part)	5,400	10.6	570	5,100	570
	Judith Basin (Part)	700	10.5	74	500	74
	Liberty (Part)	400	6.3	31	400	31
		<u>85,400</u>		<u>6,740</u>	<u>99,400</u>	<u>6,740</u>
I-3	Hill	19,300	8.2	1,580	23,000	1,580
	Blaine	8,100	10.6	857	7,400	857
	Liberty (Part)	2,200	6.3	132	2,500	132
	Chouteau (Part)	2,000	10.6	212	1,900	212
		<u>31,600</u>		<u>2,781</u>	<u>34,800</u>	<u>2,781</u>



Region and Area	County	Population	Aged 65 and Over		Projected 1971	
			Percent	Number	Popu- lation	65 and Over
<u>Southwestern</u>		<u>152,600</u>		<u>15,850</u>	<u>166,000</u>	<u>15,850</u>
R-11	Beaverhead	7,300	11.5	839	7,700	839
	Madison (Part)	2,500	13.5	338	3,000	338
		<u>9,800</u>		<u>1,177</u>	<u>10,700</u>	<u>1,177</u>
R-12	Gallatin	27,100	8.9	2,410	31,000	2,410
I-4	Lewis & Clark (Part)	28,200	10.3	2,897	31,000	2,897
	Broadwater	2,800	11.5	320	2,600	320
	Meagher	2,600	11.0	285	3,300	285
	Jefferson (Part)	2,700	9.8	265	2,900	265
		<u>36,300</u>		<u>3,767</u>	<u>39,900</u>	<u>3,767</u>
I-5	Deer Lodge	18,500	10.1	1,860	20,100	1,860
	Silver Bow	47,200	11.0	5,190	50,200	5,190
	Granite	3,000	10.8	323	3,200	323
	Powell (Part)	6,900	9.8	676	7,100	676
	Jefferson (Part)	1,700	9.8	165	1,700	165
	Madison (Part)	2,100	13.5	282	2,100	282
		<u>79,400</u>		<u>8,496</u>	<u>84,400</u>	<u>8,496</u>
<u>Southern</u>		<u>147,200</u>		<u>14,141</u>	<u>163,500</u>	<u>14,141</u>
R-13	Fergus	14,600	13.6	1,980	13,500	1,980
	Petroleum	900	11.1	100	800	100
	Judith Basin (Part)	2,300	10.5	240	2,300	240
		<u>17,800</u>		<u>2,320</u>	<u>16,600</u>	<u>2,320</u>
R-14	Wheatland	3,000	13.4	400	2,700	400
	Golden Valley (Part)	700	14.5	104	600	104
		<u>3,700</u>		<u>504</u>	<u>3,300</u>	<u>504</u>
R-15	Musselshell	4,900	14.3	700	4,100	700
	Golden Valley (Part)	500	14.5	69	400	69
		<u>5,400</u>		<u>769</u>	<u>4,500</u>	<u>769</u>
R-16	Park	13,100	11.8	1,540	13,900	1,540
	Sweet Grass	3,200	15.2	485	2,800	485
		<u>16,300</u>		<u>2,025</u>	<u>16,700</u>	<u>2,025</u>
R-17	Stillwater	5,300	11.9	630	5,200	630
R-18	Carbon	7,900	15.0	1,180	6,400	1,180
R-19	Big Horn	10,000	7.4	739	10,200	739
I-6	Yellowstone	80,200	7.4	5,920	100,000	5,920
	Treasure (Part)	600	9.0	54	600	54
		<u>80,800</u>		<u>5,974</u>	<u>100,600</u>	<u>5,974</u>

Region and Area	County	Population	Aged 65 and Over		Projected 1971	
			Percent	Number	Popu- lation	65 and Over
<u>Eastern</u>		<u>106,700</u>		<u>9,992</u>	<u>105,200</u>	<u>9,992</u>
R-20	Valley	22,700	6.5	1,470	21,700	1,470
R-21	Daniels	3,800	11.5	435	3,200	435
R-22	Sheridan	6,600	12.1	799	5,700	799
R-23	Roosevelt	11,700	9.4	1,100	13,000	* 1,100
R-24	Garfield	2,000	11.1	222	1,700	222
R-25	Richland	10,600	10.6	1,120	10,000	1,120
R-26	McCone	3,300	9.8	322	3,200	322
	Dawson	12,600	7.4	930	15,400	930
	Wibaux	1,700	11.3	192	1,400	192
		<u>17,600</u>		<u>1,444</u>	<u>20,000</u>	<u>1,444</u>
R-27	Rosebud	6,200	10.4	640	5,600	640
	Treasure (Part)	700	9.0	62	600	62
		<u>6,900</u>		<u>702</u>	<u>6,200</u>	<u>702</u>
R-28	Powder River	2,500	9.7	242	2,200	242
R-29	Fallon	4,000	8.9	354	4,200	354
	Carter	2,400	10.3	246	2,100	246
		<u>6,400</u>		<u>600</u>	<u>6,300</u>	<u>600</u>
I-7	Custer	13,600	11.8	1,603	13,200	1,603
	Prairie	2,300	11.1	255	2,000	255
		<u>15,900</u>		<u>1,858</u>	<u>15,200</u>	<u>1,858</u>
STATE TOTAL		696,000		67,000	753,000	67,000

POPULATION ESTIMATES BY COUNTY

July 1, 1965

County	Population	Aged 65 and over		Projected Population 1971	Projected 1971 Aged 65 and over	
		Percent	Number		Percent	Number
Beaverhead	7,300	11.5	839	7,700	11.5	839
Big Horn	10,000	7.4	739	10,200	7.4	739
Blaine	8,100	10.6	857	7,400	10.6	857
Broadwater	2,800	11.5	320	2,600	11.5	320
Carbon	7,900	15.0	1,180	6,400	15.0	1,180
Carter	2,400	10.3	246	2,100	10.3	246
Cascade	78,900	7.7	6,065	93,400	7.7	6,065
Chouteau	7,400	10.6	782	7,000	10.6	782
Custer	13,600	11.8	1,603	13,200	11.8	1,603
Daniels	3,800	11.5	435	3,200	11.5	435
Dawson	>12,600	7.4	930	15,400	7.4	930
Deer Lodge	>18,500	10.1	1,860	20,100	10.1	1,860
Fallon	4,000	8.9	354	4,200	8.9	354
Fergus	>14,600	13.6	1,980	13,500	13.6	1,980
Flathead	34,200	11.4	3,890	35,000	11.4	3,890
Gallatin	27,100	8.9	2,410	31,000	8.9	2,410
Garfield	2,000	11.1	222	1,700	11.1	222
Glacier	12,600	5.9	742	13,200	5.9	742
Golden Valley	1,200	14.5	173	1,000	14.5	173
Granite	>3,000	10.8	323	3,200	10.8	323
Hill	19,300	8.2	1,580	23,000	8.2	1,580
Jefferson	4,400	9.8	430	4,600	9.8	430
Judith Basin	3,000	10.5	314	2,800	10.5	314
Lake	13,400	13.3	1,780	11,900	13.3	1,780
Lewis & Clark	>29,100	10.3	2,990	32,000	10.3	2,990
Liberty	2,600	6.3	163	2,900	6.3	163
Lincoln	13,500	7.3	983	17,400	7.3	983
McCone	>3,300	9.8	322	3,200	9.8	322
Madison	4,600	13.5	620	5,100	13.5	620
Meagher	2,600	11.0	285	3,300	11.0	285
Mineral	3,200	7.3	234	4,500	7.3	234
Missoula	>46,200	9.2	4,242	52,300	9.2	4,242
Musselshell	>4,900	14.3	700	4,100	14.3	700
Park	>13,100	11.8	1,540	13,900	11.8	1,540
Petroleum	900	11.1	100	800	11.1	100
Phillips	6,000	13.2	790	5,400	13.2	790
Pondera	7,600	8.3	631	8,100	8.3	631
Powder River	2,500	9.7	242	2,200	9.7	242
Powell	7,400	9.8	725	7,700	9.8	725
Prairie	2,300	11.1	255	2,000	11.1	255
Ravalli	12,400	14.6	1,810	13,000	14.6	1,810
Richland	10,600	10.6	1,120	10,000	10.6	1,120
Roosevelt	11,700	9.4	1,100	13,000	9.4	1,100
Rosebud	>6,200	10.4	640	5,600	10.4	640
Sanders	6,900	13.3	918	6,500	13.3	918
Sheridan	6,600	12.1	799	5,700	12.1	799

County	Population	Aged 65 and Over		Projected Population 1971	Aged 65 and Over	
		Percent	Number		Percent	Number
Silver Bow	47,200	11.0	5,190	50,200	11.0	5,190
Stillwater	5,300	11.9	630	5,200	11.9	630
Sweet Grass	3,200	15.2	485	2,800	15.2	485
Teton	7,200	10.0	719	6,900	10.0	719
Toole	7,900	7.8	615	8,400	7.8	615
Treasure	1,300	9.0	116	1,200	9.0	116
Valley	22,700	6.5	1,470	21,700	6.5	1,470
Wheatland	3,000	13.4	400	2,700	13.4	400
Wibaux	1,700	11.3	192	1,400	11.3	192
Yellowstone	80,200	7.4	5,920	100,000	7.4	5,920
<hr/>			<hr/>	<hr/>		<hr/>
TOTAL	696,000		67,000	753,000		67,000



## DETERMINATION OF BED NEED

### A. General Hospitals

The method adopted is in accordance with the procedure established in Form PHS, 708-2 as follows:

- (a) Multiply the current use rate (annual patient days per 1,000 of area population) by projected area population and divide by 365 to obtain the projected average daily census.
- (b) Divide the projected average daily census by .80 (occupancy factor) and add 10 to obtain the number of beds for the area.

### B. Long-Term Care Facilities

- (a) Same as in (a) above, substituting population figures age 65 and over.
- (b) Same as in (b) above, except use of .90 as the occupancy factor instead of .80.
- (c) A use rate of 13,056 was used for Service Areas without facilities, or without adequate utilization experience. This use rate is the average of sixteen (16) service areas having reasonable experience.

### C. Tuberculosis Hospitals

The Statewide bed need was determined by the Public Health Service formula using the current average daily census divided by 0.80 (occupancy factor).

### D. Mental Facilities

For purposes of this plan the bed needs were determined by the Public Health Service formula using the current average daily census divided by 0.90 (occupancy factor). Also refer to the 1966-1967 Montana State Plan for Community Mental Health Centers Construction.



CHAPTER IV

PROGRAM FOR EACH SERVICE AREA

GROUPED BY REGIONS

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-1, Libby		Montana			1967			
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED GEN. Col. 9 + 10 LTC. Col. 9 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	13.5	17.4	4,588	340	16	30		
LONG-TERM CARE FACILITIES	0.98 <sup>1/</sup>	0.98 <sup>1/</sup>	(3,875)	13,056 <sup>2/</sup>	35	49	16	65

AREA NARRATIVE

Area R-1 - Libby

This service area consists of Lincoln County, with Libby being the largest community in the area. With minor exceptions, industry is confined to lumber and wood products and limited mining.

This is mountainous area with transportation routes following the valleys of the mountain ranges. Transportation is adequate by highways and railroad.

Construction of the \$352 million Libby Dam was scheduled for March 1966. This is to be located 17 miles upstream from Libby and when completed will back water to within a few miles of Eureka. The construction will involve relocation of the railroad and highways in the county. The Corps of Engineers estimates that approximately 530 workers will be located in the area during peak 1966; 1,200 by mid-1967; 2,200 in 1968, 1969 and 1970. Over 1,800 are estimated for mid-1971 and about 1,500 at mid-1972. The project is scheduled to be completed in 1973.

No additional hospital beds are scheduled for construction in the area at this time due to the construction of the dam. It is anticipated that the occupancy of the hospital will increase due to the influx of workers.

The existing hospital at Libby is in need of modernization with planning under way for the expansion of emergency and out-patient facilities and other services. An adjustment of 16 beds was made in the long-term care category to allow for the construction of a 65 bed nursing home which will also provide beds for medicare. This facility will replace the present long-term care facility which is a two-story converted residential dwelling of non-fire resistive construction.

- 1/ Population age 65 and over.
- 2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.





IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OF (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)					
					A	B	C	D	15						
											11	12			
6	7	8	9	10	11	12	13	14	15	16	17	18			
GENERAL															
St. John's Lutheran	13500 Lincoln	Libby	NPA	34	34	0	0	0	-	0	1,038	4,588			
AREA TOTAL				34	34	0	0	0	-	0	1,038	4,588			
LONG-TERM CARE NURSING HOMES															
Lincoln County Nursing Home	Lincoln	Libby	Co.	10	10	0	0	0	-	0	15	3,875			
AREA TOTAL				10	10	0	0	0	-	0	15	3,875			

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana		3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED		ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED				GEN. Col. 9 + 10	LTC. Col. 9 + 10		
4	5	6	7	8	9	10	11	12	
GENERAL HOSPITALS	34.2	35.0	28,675	839	80	110	18	128	
LONG-TERM CARE FACILITIES	3.89 1/2	3.89 1/2	46,101	11851	126	150			
AREA NARRATIVE									

This service area consists of Flathead County. The largest communities in the area are Kalispell, Whitefish, and Columbia Falls. The major industries in the area are logging, lumber, wood products, agriculture, fruit growing, and livestock. This is also a recreational area for boating, skiing, fishing, etc. with many summer homes located on the shores of Flathead and Whitefish Lakes and in other areas. The West Entrance to Glacier Park is located 16 miles from Columbia Falls.

Due to the moderate climate and scenic country many persons retire in this area, which in part, accounts for the large number of persons aged 65 and over. Highways and railroads follow the valleys. Due to the construction of the Libby Dam, it will be necessary to relocate 59 miles of Great Northern Railway line and construct a 7.7 mile tunnel. This will require approximately three and one-half years and cost approximately \$123 million. Due to the high hazard of tunnel work, increased utilization of the hospitals at Whitefish and Kalispell is anticipated.

The two hospitals at Kalispell are in need of modernization while the facility at Whitefish is in need of replacement. This is a frame structure of non-fire resistive construction. An adjustment for 17 beds has been made for this area to allow for a 50-bed facility at Whitefish. This hospital serves the area for Eureka to Whitefish, and east to Columbia Falls, location of the Anaconda aluminum plant, Hungry Horse Dam and the West Entrance to Glacier Park.

In the long-term care category, 7 new beds are needed for the area with modernization of Facilities at Kalispell.

1/ Population age 65 and over.



DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGE 65 AND OVER:		4. STATE									
R-2, Flathead County		CURRENT	PROJECTED	CURRENT	PROJECTED	Montana	1967								
		34,200	35,000	3,890	3,890	5. FISCAL YEAR	1967								
CATEGORY COMMUNITY	LOCATION	NAME OF COUNTY		NO. OF FACILITIES		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		% NEED MET		TOTAL EXCESS BEDS IN AREA	22		
		TOTAL EXISTING	TOTAL NEEDED	TOTAL ADDED	TOTAL TO BE	TOTAL MODERNIZED	TOTAL NEEDED	TOTAL ADDED	TOTAL TO BE	TOTAL MODERNIZED	TOTAL NEEDED				
6		8	9	10	11	12	13	14	15	16	17	18	19	20	21
7															
GENERAL HOSPITALS															
Whitefish	Flathead	1	1	0	1	24	24	0	-	0	50	26	24		
Kalispell	Flathead	2	2	0	2	78	78	0	-	0	78	0	78		
TOTAL		3	3	0	3	102	102	0	-	0	128	26	102	0	0
LONG-TERM CARE NURSING HOMES															
Kalispell	Flathead	2	2	0	1	143	54	0	0	89	150	7	54		
TOTAL		2	2	0	1	143	54	0	0	89	150	7	54	50	62
DIAGNOSTIC OR TREATMENT CENTERS															
Whitefish	Flathead	1	1	0	1										
Kalispell	Flathead	2	2	0	2										
TOTAL		3	3	0	3									0	0

[illegible]

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

MONTANA

1967

3. AREA

R-2, Flathead County

4. PERIOD COVERED BY INVENTORY

January 1, 1965, - December 31, 1965

5.

Page

of

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATES

CATEGORY  
NAME OF FACILITY

NAME  
OF  
COUNTY  
CITY  
OR  
TOWN

CONTROL

BY FEDERAL STANDARDS

BY STATE  
STANDARDS  
(Optional)

CONFORMING

ADMISSIONS  
OR  
DISCHARGES  
(Including  
New-born)

6

7

8

9

10

11

12

13

14

15

16

17

18

GENERAL

Whitefish Memorial

Flathead

White Fish

NPA

24

24

0

0

0

-

0

2,285

9,728

Kalispell General

Flathead

Kalispell

NPA

66

17

49

0

0

-

0

2,963

16,414

Flathead County

Flathead

Kalispell

Co.

12

12

0

0

0

-

0

131

2,533

AREA TOTAL

102

53

49

0

0

-

0

5,379

28,675

LONG-TERM CARE

Flathead County

Nursing Home

Flathead

Kalispell

Co.

54

54

0

0

0

-

0

56

19,271

Immanual Lutheran

Flathead

Kalispell

NPA

89

0

0

0

-

89

14

26,830

AREA TOTAL

143

54

0

0

0

-

89

70

46,101



DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA			2. STATE		Montana		3. FISCAL YEAR	
R-3, Hot Springs							1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED GEN. Col. 9 + 10 LTC. Col. 9 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BEDS
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	6.9	6.5	4,553	660	12	25		
LONG-TERM CARE FACILITIES	0.92 <u>1/</u>	0.92 <u>1/</u>	7,876	8561	22	34		
AREA NARRATIVE								

This area consists of Sanders County only. The larger communities are Thompson Falls, Plains, and Hot Springs. Industry, in general, is confined to logging, lumber and wood products. This area has some of the most rugged terrain in the United States with transportation routes following the valleys parallel to the mountain ranges which is considered adequate.

The hospital at Hot Springs is in need of modernization and an additional seven beds due to high utilization of the facility. The long-term care beds at Hot Springs are more than adequate for the area.

1/ Population age 65 and over.



1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGE 65 AND OVER		4. STATE													
		CURRENT	PROJECTED	CURRENT	PROJECTED	Montana													
R-3, Hot Springs		6,900	6,500	918	918	1967													
LOCATION		NO. OF FACILITIES				5 FISCAL YEAR													
CATEGORY	NAME OF COUNTY	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED						TOTAL EXCESS	
						FEDERAL STANDARDS		STATE STANDARDS		CONFORMING		TOTAL NEEDED		TO BE ADDED		TO BE MODERNIZED		TOTAL EXCESS	
		8	9	10	11	12	A-B-C	D	13	14	15	16	17	18	19	20	21	22	
GENERAL HOSPITALS	Sanders	1	1	0	1	18	18	0	-	0	25	7	18						
		1	1	0	1	18	18	0	-	0	25	7	18						
		TOTAL	1	1	0	1	18	18	0	-	0	25	7	18					
LONG-TERM CARE NURSING HOMES	Sanders	1	1	0	0	39	0	0	-	39	34	0	0						
		1	1	0	0	39	0	0	-	39	34	0	0						
		TOTAL	1	1	0	0	39	0	0	-	39	34	0	0					
DIAGNOSTIC OR TREATMENT CENTERS	Sanders	1	1	0	1														
		1	1	0	1														
		TOTAL	1	1	0	1													

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IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION							STATISTICS		
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Including New-born)	PATIENT- DAYS	
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)				
					A	B	C	D					
6	7	8	9	10	11	12	13	14	15	16	17	18	
<u>GENERAL</u>													
Sanders County General	6900 Sanders	Hot Springs	NPA	18	18	0	0	0	-	0	873	4,553	
AREA TOTAL				18	18	0	0	0	-	0	873	4,553	
<u>LONG-TERM CARE NURSING HOMES</u>													
Hot Springs Manor	Sanders	Hot Springs Prop.		39	0	0	0	0	-	39	39	7,876	
AREA TOTAL				39	0	0	0	0	-	39	39	7,876*	
*Ten month period.													

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-4, Lake County		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	13.4	11.9	21,595	1,612	53	76		
LONG-TERM CARE FACILITIES	1.78 <u>1/</u>	1.78 <u>1/</u>	(14,221)	13,056 <u>2/</u>	64	81		

AREA NARRATIVE

This area was formerly included in the Flathead and Missoula Service Areas. The hospitals at St. Ignatius and Polson have been serving the area for many years, definitely establishing Lake County as a service area. This is mountainous country with most of Flathead Lake within its confines and is served by a network of good highways. The scenic beauty and mild climate attracts many retired persons to locate there, particularly on the East Shore of Flathead Lake. This accounts for the high percentage of persons age 65 and over. The larger communities are Polson, Ronan and St. Ignatius. The industries are logging, lumber, wood products, agriculture, dairying, fruit growing and livestock. This is also a recreational area for boating, fishing, etc.

The hospitals at Ronan and Polson are programmed for modernization. The nursing home at the St. Joseph Hospital, Polson, is in need of replacement due to the construction of the existing building.

- 1/ Population age 65 and over
- 2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



Montana

PROJECTED

CURRENT

R-4, Lake

13,400

11,900

1,780

1,780

1967

LOCATION

CATEGORY COMMUNITY	NAME OF COUNTY	NO. OF FACILITIES					NO. OF BEDS EXISTING					NO. OF BEDS PROGRAMED & NEED MET					TOTAL EXCESS BEDS IN AREA								
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION	21	22								
							FEDERAL STANDARDS		STATE STANDARDS																
							A-B-C	D																	

6

7

GENERAL HOSPITALSPolson  
Ronan  
St. Ignatius

TOTAL

LONG-TERM CARENURSING HOMESPolson  
Ronan  
St. Ignatius

TOTAL

DIAGNOSTIC ORTREATMENT CENTERSPolson  
St. Ignatius  
Ronan

TOTAL



3. AREA

R-4, Lake County

4. PERIOD COVERED BY INVENTORY

January 1, 1965, to December 31, 1965

5.

Page

of

pages

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)								
					A	B	C	D									
6	7	8	9	10	11	12	13	14	15	16	17	18					
<u>GENERAL</u>																	
St. Joseph's 13400	Lake	Polson	NPA	40	0	40	0	0	-	0	40	10,683					
St. Luke	Lake	Ronan	NPA	24	0	24	0	0	-	0	621	4,841					
Holy Family	Lake	St. Ignatius	NPA	20	0	0	0	0	-	20	673	6,071					
AREA TOTAL				84	0	64	0	0	-	20	1,334	21,595					
<u>LONG-TERM CARE NURSING HOMES</u>																	
St. Joseph's Rest Home	Lake	Polson	NPA	19	19	0	0	0	-	0	4	7,915					
Conne Nursing Home	Lake	Ronan	Prop.	13	0	0	0	0	-	13	3	4,229					
Holy Family Hospital	Lake	St. Ignatius	NPA	10	0	0	0	0	-	10	10	2,077					
AREA TOTAL				42	19	0	0	0	-	23	17	14,221					

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-5, Hamilton		Montana			1967			
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	12.4	13.0	8,444	681.	24.	40		
LONG-TERM CARE FACILITIES	1.81 1/	1.81 1/	11,281	6233	31	44		

AREA NARRATIVE

The area consists of Ravalli County only. The larger communities are Hamilton, Stevensville and Victor. With minor exceptions, the industry is logging, lumber and wood products, agriculture, stock raising and some fruit growing. The Rocky Mountain Laboratory of the U.S. Public Health Service is located at Hamilton.

51

The area is primarily a valley between mountain ranges with the highway following the valley. The railroad also follows the valley and terminates at Darby. The latter does not provide passenger service. The area is served by a good highway.

The relatively mild climate and scenery make this an attractive area for persons in retirement. This, in part, accounts for the high percentage of 14.6 percent or 1,810 persons aged 65 and over.

The hospital at Hamilton is in need of modernization and an additional eight beds. Facilities for long-term care are considered more than adequate.

1/ Population age 65 and over.

PH 7  
REV 4-07



IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS							
					A	B	C	D	BY STATE STANDARDS (Optional)			
6	7	8	9	10	11	12	13	14	15	16	17	18
<u>GENERAL</u>												
Marcus Daly	12400 Ravalli	Hamilton	NPA	32	0	32	0	0	-	0	1,687	8,444
AREA TOTAL				32	0	32	0	0	-	0	1,687	8,444
<u>LONG-TERM CARE</u> <u>NURSING HOMES</u>												
Valley View Estates	Ravalli	Hamilton 3	Prop.	96	0	0	0	0	-	96	33	11,281
AREA TOTAL				96	0	0	0	0	-	96	33	11,281



DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA	2. STATE		3. FISCAL YEAR	
	Montana		1967	
	CIVILIAN POPULATION (In thousands)		ADJUSTMENT (Explain in Area Narrative)	
CATEGORY	CURRENT	PROJECTED	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	
	5	6	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	
4				
GENERAL HOSPITALS	49.9	57.4	9	321
LONG-TERM CARE FACILITIES	4.53	1/ 4.53	2/ 162	190

AREA NARRATIVE

This service area consists of Missoula and Mineral Counties and a portion of Powell County. Industry is chiefly logging, lumber and wood products with some agriculture, stock raising, dairying and manufacturing. This is mountainous area with transportation routes following the valleys. Missoula is the trade center for Western Montana and is the location of the University of Montana and the U. S. Forest Service. It is also considered as the medical center for Western Montana.

1/ 4

The area has four hospitals, all of which are non-conforming. The existing rehabilitation facility at Missoula is in need of replacement. Long-term care facilities are adequate with the exception of those at Superior which are in need of replacement.

The Northern Pacific Beneficial Association Hospital at Missoula is a 71-bed Medical-Surgical hospital owned and operated by the Northern Pacific Beneficial Association, whose membership is confined to employees of the Northern Pacific Railroad over a wide area. In the past, 55 beds were reserved for N.P.B.A. members with 16 beds available for community service. Beds are no longer restricted or reserved for N.P.B.A. members and all beds are available to the community and N.P.B.A. on a first come, first served basis. While this facility is licensed for 71 beds, the modernization survey revealed a capacity of 65 beds.

- 1/ Population age 65 and over.
- 2/ Use rate of 13.056 is average of sixteen (16) service areas having reasonable experience.

HEALTH, EDUCATION, AND WELFARE PUBLIC HEALTH SERVICE SILVER SPRING, MARYLAND 20910																	
1. AREA		2. TOTAL CIVILIAN POPULATION			3. CIVILIAN POPULATION AGE 65 AND OVER			4. STATE									
I-1, Missoula		CURRENT			PROJECTED			Montana									
		49,900			57,400			1967									
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				5. FISCAL YEAR		TOTAL EXISTING BEDS IN AREA	
		TOTAL EXISTING		TOTAL NEEDED		TOTAL EXISTING		TOTAL NEEDED		CONFORMING		TOTAL NEEDED		TO BE ADDED			
		8	9	10	11	12	NONCONFORMING				16	17	18	19	20		
							FEDERAL STANDARDS		STATE STANDARDS								
		A-B-C		D													
GENERAL HOSPITALS	7																
Superior	Mineral	1	1	0	1	9	9	0	-	0	0	9	0	0	9		
Missoula	Missoula	3	3	0	3	319	319	0	-	0	0	312	0	0	312		
TOTAL		4	4	0	4	328	328	0	-	0	0	321	0	0	321	0	7
LONG-TERM CARE NURSING HOMES																	
Superior	Mineral	1	1	0	1	12	12	0	-	0	0	12	0	0	9		
Missoula	Missoula	4	4	0	0	191	191	10	-	0	181	178	0	0	0		
TOTAL		5	5	0	1	203	203	22	-	0	181	190	0	0	9	95	13
REHABILITATION FACILITIES																	
Missoula	Missoula	1	1	0	1												
TOTAL		1	1	0	1											0	0

PHS-708.7  
REV. 2-67

FORM APPROVED:  
BUDGET BUREAU NO. 69-PP

AREA SUMMARY AND PROGRAM







DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-6, Glacier County		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	12.6	13.2	12,224	970	35	54		
LONG-TERM CARE FACILITIES	0.74 1/	0.74 1/	12,720	17189	35	49		
AREA NARRATIVE								

This area contains Glacier County, including the Blackfeet Indian Reservation. This lies east of the Continental Divide, is relatively flat and the beginning of the Great Plains. The principal industries are agriculture, stock raising, oil production and refining. The area is served by adequate highway and railroad transportation. Principle communities are Cut Bank and Browning, with the East Entrance to Glacier Park at East Glacier.

There is one general hospital in the area rendering community service which is in need of modernization and an additional ten beds. The U.S. Public Health Service operates a hospital for the Indian population at Browning. In the long-term care category, fifteen beds are to be added and twelve beds to be modernized.

1/ Population age 65 and over.

4. STATE

Montana

1967

# OF THE

UNITED STATES OF AMERICA

NO. OF BEDS PROGRAMMED

1

OL. 17-401

5.

Cut Bank

# Glacier

TOTAL

LONG-TERM CARE  
NURSING HOMES

## Cut Bank

# Glacier

TOTAL

**DIAGNOSTIC OR  
~~TREATMENT~~ CENTERS**

Cut Bank

## Glacier

TOTAL

FORM & PRICE: 110  
BUDGET BUY 110 69-550



IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING							CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	17
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)					
					A	B	C	D						
										11	12			
6	7	8	9	10	11	12	13	14	15	16	17			
GENERAL														
Glacier County Memorial	Glacier	Cut Bank	NPA	44	44	0	0	0	-	0	1,275	12,224		
AREA TOTAL	12600			44	44	0	0	0	-	0	1,275	12,224		
LONG-TERM CARE NURSING HOMES														
Glacier County Nursing Home	Glacier	Cut Bank	NPA	12	12	0	0	0	-	0	5	5,024		
Glacier Rest Home	Glacier	Cut Bank <sup>1</sup>	Prop	22 <sup>1</sup> / <sub>2</sub>	0	0	0	0	-	22	9	7,696 <sup>2</sup> / <sub>3</sub>		
AREA TOTAL				34	12	0	0	0	-	22	14	12,720		
1/ No plant evaluation made of this facility.														
2/ Licensed as a nursing home December 20, 1965														

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-7, Toole County		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	7.9	8.4	4,478	567	13	26		
LONG-TERM CARE FACILITIES	0.62	1/ 0.62	10,768	17368	30	44		
AREA NARRATIVE								

This service area consists of Toole County. This has a relatively flat terrain and has good transportation by highway and railroad. Industries are chiefly agriculture, stock raising, oil production and refining.

The existing hospital at Shelby is in need of modernization. Long-term care facilities in the area are adequate at present.

151

1/ Population age 65 and over.

1. AREA		2. LOCAL CIVILIAN POPULATION		3. CIVILIAN POPULATION		4. STATE											
R-7, Toole County		CURRENT	PROJECTED	CURRENT	PROJECTED	Montana											
		7,900	8,400	615	615	1967											
LOCATION		NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				NEED FOR			
CATEGORY COMMUNITY	NAME OF COUNTY	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING				CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION	TOTAL
							A-B-C	D	FEDERAL STANDARDS	STATE STANDARDS							
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
GENERAL HOSPITALS	Toole	1	1	0	1	37	37	0	-	0	26	0	26				
		TOTAL	1	1	0	1	37	37	0	-	0	26	0	26	0	0	11
LONG-TERM CARE NURSING HOMES	Toole	1	1	0	0	34	0	0	-	34	44	10	0				
		TOTAL	1	1	0	0	34	0	0	-	34	44	10	0	77	100	0
DIAGNOSTIC OR TREATMENT CENTERS	Toole	1	1	0	1												
		TOTAL	1	1	0	1									0	0	



IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)					
					A	B	C	D	15						
											11	12			
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>GENERAL</u>															
Toole County	7900 Toole	Shelby	NPA	37	0	37	0	0	-	0	851	4,478			
AREA TOTAL				37	0	37	0	0	-	0	851	4,478			
<u>LONG-TERM CARE NURSING HOMES</u>															
Toole County -Nursing Home	Toole	Shelby	NPA	34	0	0	0	0	-	34	48	10,768			
AREA TOTAL				34	0	0	0	0	-	34	48	10,768			

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR					
R-8, Phillips County		Montana			1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED		ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED				GEN. $\frac{\text{Col. 9}}{.80} + 10$	LTC. $\frac{\text{Col. 9}}{.90} + 10$		
4	5	6	7	8	9	10	11	12	
GENERAL HOSPITALS	6.0	5.4	6,944	1,157	17	31			
LONG-TERM CARE FACILITIES	0.79	1/ 0.79	9,146	11,577	25	38			
AREA NARRATIVE									

This service area consists of Phillips County and was previously included with Valley County. The area has established hospital and long-term care facilities which serve a definite area. This is relatively flat country with good highways and railroad service. The industry in the area is generally agriculture and livestock.

The area is served by a hospital at Malta which is conforming. While the program indicates that one bed is to be added, this is not programmed for construction.

In the Long-Term Care category, the area is in need of seven additional beds.

1/ Population age 65 and over.

1. AREA

R-8, Phillips County

2. TOTAL CIVILIAN POPULATION	3. CIVILIAN POPULATION AGE 65 AND OVER:
CURRENT	PROJECTED
6,000	5,400
790	790

Montana  
1967

LOCATION

CATEGORY COMMUNITY	LOCATION	NAME OF COUNTY	NO. OF FACILITIES				NO. OF BEDS EXISTING							NO. OF BEDS PROGRAMED				NEED MET			TOTAL EXCESS BEDS IN AREA (Col. 17-Col. 12)
			TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION					
								FEDERAL STANDARDS									STATE STANDARDS				
								A-B-C	D												
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22					
<u>GENERAL HOSPITALS</u>	Malta	Phillips	1	1	0	0	30	0	0	-	30	31	1	0							
			TOTAL	1	1	0	0	30	0	0	-	30	31	1	0	97	100	0			
<u>LONG-TERM CARE NURSING HOMES</u>	Malta	Phillips	1	1	0	0	31	0	0	-	31	38	7	0	82	100	0				
			TOTAL	1	1	0	0	31	0	0	-	31	38	7	0	82	100	0			
<u>DIAGNOSTIC OR TREATMENT CENTERS</u>	Malta	Phillips	1	1	0	0															
			TOTAL	1	1	0	0									100	100				

-65-



3. AREA R-8, Phillips County

4. PERIOD COVERED BY INVENTORY  
January 1, 1965 - December 31, 1965

5. Page 1 of 1

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	17
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)	15	16				
					A	B	C	D							
												11			
6	7	8	9	10	11	12	13	14	15	16	17				
<u>GENERAL</u>															
Malta Hospital	Phillips <i>Good</i>	Malta	NPA	30	0	0	0	0	-	30	795	6,944			
TOTAL				30	0	0	0	0	-	30	795	6,944			
<u>LONG-TERM CARE NURSING HOMES</u>															
Vickhamer Sunset Home	Phillips	<i>g</i> Malta	Prop	31	0	0	0	0	-	31	25	9,146*			
TOTAL				31	0	0	0	0	-	31	25	9,146			
*Opened September 9, 1965.															

\*Opened September 9, 1965.

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-9, Pondera County		Montana			1967			
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	7.6	8.1	10,038	1,321	29	47		
LONG-TERM CARE FACILITIES	0.63	1/ 0.63	6,510	10,333	18	30		
AREA NARRATIVE								

The area consists of Pondera County which was previously included with Toole County. This area extends from the East slopes of the Continental Divide on the West end, with rolling country and plains to the East. It is served by good highways and roads and also has railroad service. Industries are chiefly agriculture and stock raising.

The existing St. Mary's Hospital at Conrad is in need of replacement. Since the Sisters do not have the necessary finances for the replacement of the facility, they have served notice to the area that the hospital is to be closed on January 1, 1969. The people of the area are considering a bond issue for the construction of a new hospital.

Long-term care facilities in the area are adequate.

1/ Population age 65 and over.





IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION										ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING					
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)						
					A	B	C	D							
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>GENERAL</u>															
St. Mary's	7600 Pondera	Conrad	NPA	36	36	0	0	0	-	0	2,589	10,038			
AREA TOTAL				36	36	0	0	0	-	0	2,589	10,038			
<u>LONG-TERM CARE NURSING HOMES</u>															
Pondera Pioneer Nursing Homes	Pondera	Conrad	Co.	38	0	0	0	0	-	38	15	6,510			
AREA TOTAL				38	0	0	0	0	-	38	15	6,510			

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-10, Choteau		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	8.1	7.8	3,347	413	9	21		
LONG-TERM CARE FACILITIES	0.81	1/0.81	1,631	13,056	29	42		

AREA NARRATIVE

This area is comprised of Teton County and the northern portion of Lewis and Clark County. The largest communities in the area are Choteau, Dutton, Fairfield and Augusta. The main industries are agriculture and livestock. This is relatively rolling country with wilderness country to the west and the Continental Divide. Transportation is mainly by highway.

The area is served by the hospital at Choteau which is need of modernization. A 29-bed nursing home addition is under construction at the existing Teton County Rest Home at Choteau.

- 1/ Population age 65 and over.
- 2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.

## DEPARTMENT OF

R-10, Choteau

CURRENT

PROJECTED

8.100

7,800

## Montana

5. FISCAL YEAR

812

812

LOCATION

CATEGORY	COMMUNITY
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
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62	62
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77	77
78	78
79	79
80	80
81	81
82	82
83	83
84	84
85	85
86	86
87	87
88	88
89	89
90	90
91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

NAME OF  
COUNTY

5

7

## GENERAL HOSPITALS

## Choteau

# Teton

TOTAL

**LONG-TERM CARE**  
**NURSING HOMES**

## Chateau

## Teton

TOTAL

**DIAGNOSTIC OR  
TREATMENT CENTERS**

## Chateau

TOTAL

PHS-708-7  
REV 2-67

AREA SUMMARY AND PROGRAM

FORM APPROVED:  
BUDGET BUREAU NO. 63-17



4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5. Page

of

Pages

AREA R-10, Choteau

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS	
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)							
					A	B	C	D								
										11	12	13				14
			9	10												
GENERAL																
Teton Memorial	8160 Teton	Choteau	NPA	27	0	27	0	0	0	-	0	643	3,347			
AREA TOTAL				27	0	27	0	0	0	-	0	643	3,347			
LONG-TERM CARE NURSING HOMES																
Teton County Rest Home	Teton	Choteau	Co.	(9)	(9)	0	0	0	0	-	0	3	1,631 1/			
Teton County Rest Home	Teton	Choteau	Co.	29uc	0	0	0	0	0	-	29uc					
AREA TOTAL				29	0	0	0	0	0	-	29	3	1,631			
uc Under Construction																
1/ Reporting period, May 25, 1965, through December 31, 1965, on basis of 9 beds.																

# DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
I-2, Great Falls, Intermediate		Montana		1967				
CATEGORY	CIVILIAN POPULATION POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	85.4	99.4	99,071	1,160	316	405		
LONG-TERM CARE FACILITIES	6.74	6.74	96,441	14,309	264	304		
AREA NARRATIVE								

This service area consists of Cascade County and portions of Chouteau and Judith Basin Counties. Great Falls is the major trade center and hospital base area serving the northern portion of the State. The area has diversified industries including agriculture, livestock, smelting, flour milling, oil-refining and some manufacturing. Located at Great Falls are the College of Great Falls, smelter and electrolytic plant of the Anaconda Copper Mining Co., and the Air Force Base. The Montana Power Co. has a series of dams for the generation of electric power. Transportation is by highway, railroad and air.

This is the second largest urban area of the State and has a population of 85,400 with a project of 99,400 in 1971. The facilities in the area are such that all but a few of the most highly specialized services can be provided. Included in the area is the Air Force Hospital which is restricted to air force personnel and dependents.

The bed need for the area has been met and all facilities are conforming with the exception of the Columbus Hospital which is in need of some modernization.

1. AREA		2. TOTAL CIVILIAN POPULATION		3. DATE	
CATEGORY	COMMUNITY	CURRENT	PROJECTED	MONTANA	
		85,400	99,400	6,740	1967

CATEGORY COMMUNITY	LOCATION	NAME OF COUNTY	NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				NO. OF BEDS PROGRAMED				TOTAL PROGRAMED	TOTAL PROGRAMED
			TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NON-CONFORMING			TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	TOTAL PROGRAMED	TOTAL PROGRAMED				
								FEDERAL STANDARDS												
								A-B-C	D	STATE STANDARDS										
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22				
<b>GENERAL HOSPITALS</b>																				
Great Falls		Cascade	2	2	0	1	405	90	0	-	315	387	0	72						
Fort Benton		Chouteau	1	1	0	0	18	0	0	-	18	18	0	0						
TOTAL			3	3	0	1	423	90	0	-	333	405	0	72	82	82	18			
<b>LONG-TERM CARE NURSING HOMES</b>																				
Great Falls		Cascade	4	4	0	0	426	0	0	-	426	284	0	0						
Fort Benton		Chouteau	1	1	0	0	20	0	0	-	20	20	0	0						
TOTAL			5	5	0	0	446	0	0	-	446	304	0	0	147	147	142			
<b>DIAGNOSTIC OR TREATMENT CENTERS</b>																				
Great Falls		Cascade	3	3	0	1														
Fort Benton		Chouteau	1	1	0	0														
TOTAL			4	4	0	1									75	75				



1. AREA		2. CIVILIAN POPULATION		3. CIVILIAN POPULATION 65 AND OVER		4. STATE															
I-2, Great Falls Intermediate		CURRENT		PROJECTED		Montana 1967															
LOCATION		85,400		99,400		6,740															
CATEGOR COMMUNITY	NAME OF COUNTY	NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				NO. OF BEDS NEEDED				TOTAL EXCESS BEDS IN AREA			
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORMING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUCTION	MODERNIZATION	TOTAL EXCESS					
							A-B-C	D	STATE STANDARDS												
6 A	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22					
REHABILITATION FACILITIES	Cascade	1	1	0	0																
	TOTAL	1	1	0	0									100	100						
MENTAL FACILITIES	Cascade	1	1	0	0	36	0	0	0	36	36	0	0	100	100						
	TOTAL	1	1	0	0	36	0	0	0	36	36	0	0	100	100						
1/ Refer to 1966-1967 Montana State Plan for Community Mental Health Center Construction.																					

-75-

3. AREA

I-2, Great Falls Intermediate

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5.

Page 2 of 2

Page 2

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Including New-born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)					
					A	B	C	D	15						
											11	12			
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>GENERAL</u>															
Montana Deaconess	78900 Cascade	Great Falls	NPA	(160)	-	-	-	-	-	0	Closed	3/14/65			
Montana Deaconess	Cascade	Great Falls	NPA	218	0	0	0	0	-	218	8,740	49,348 1/			
Columbus	Cascade	Great Falls	NPA	187	0	0	90	0	-	97	8,387	46,518			
St. Clare Hospital	Chouteau 7400	Fort Benton	NPA	18	0	0	0	0	-	18	605	3,205			
AREA TOTAL				423	0	0	90	0	-	333	17,732	99,071			
1/ Opened March 14, 1965															

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATUS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING							CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	DATE		
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)							
					A	B	C	D								
										11	12				13	14
				10												
<b>LONG-TERM CARE NURSING HOME</b>																
St. Clare Hospital	Chouteau	Fort Benton	NPA	20	0	0	0	0	0	-	20	-	6,866			
Cascade County Convalescent	Cascade	Great Falls	Co.	222	0	0	0	0	0	-	222	771	74,610			
Montana Deaconess	Cascade	Great Falls	NPA	108uc	0	0	0	0	0	-	108uc					
Park Place Nursing Home	Cascade	Great Falls	Prop	60	0	0	0	0	0	-	60	111	14,965			
McAuley Nursing Home	Cascade	Great Falls	Prop	36	0	0	0	0	0	-	36	Licensed	7/7/66			
AREA TOTAL				446	0	0	0	0	0	-	446	882	96,441			
<b>MENTAL FACILITIES</b>																
Montana Deaconess	Cascade	Great Falls	NPA	(27)	(27)	0	0	0	0	-	0	Closed	3/14/65			
Montana Deaconess	Cascade	Great Falls	NPA	36	0	0	0	0	0	-	36	768	4,700			
AREA TOTAL				36	0	0	0	0	0	-	36	768	4,700			
uc - Under Construction																



DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
I-3, Havre Intermediate		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6xCol. 8 365	BED NEED GEN. Col. 9 .80 LTC. Col. 9 .90 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	31.6	34.8	35,823	1,134	108	145		
LONG-TERM CARE FACILITIES	2.78 1/	2.78 1/	38,916	13,999	107	128		

AREA NARRATIVE

This area consists of Hill and Blaine Counties, most of Liberty County and the northern portion of Chouteau County. The Rocky Boy and Fort Belknap Indian Reservations are located in this area. This is relatively flat country with good transportation by highway and railroad. Industries in the area are chiefly livestock, agriculture and some mining.

There are four hospitals in the area, three of which are in need of modernization. Plans include modernization of 10 beds at Chester, and 77 beds at Havre. The Kennedy Deaconess Hospital at Havre has under construction the finishing of the third floor shell in the new portion of the hospital. This will make available an additional 27 beds for a total of 97 beds. Since the Kennedy Deaconess Hospital and the Sacred Heart Hospital are in need of modernization or replacement, the community and area are exploring possibilities of replacing the two existing hospitals through the construction of a single new hospital offering more complete services. This planning should take into account the need for beds for the Indian population at the Rocky Boy Indian Reservation. These Indians must now travel approximately 75 miles to the nearest Indian hospital at Fort Belknap. The hospital at Fort Belknap, operated by the Public Health Service, serves the Indian population of the reservations and provides emergency services for the non-Indian population.

No long-term beds are programmed for the area since the bed needs have been met through the construction of the Lutheran Home of the Good Shepherd at Havre.

1/ Population age 65 and over.

1. AREA	2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION		4. STATE	
	CURRENT	PROJECTED	CURRENT	PROJECTED	1967	1967
I-3, Havre Intermediate	31,600	34,800	2,781	2,781		

CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				MODERN- IZATION	TOTAL EXCESS BEDS IN AREA	
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED			
							FEDERAL STANDARDS		STATE STANDARDS							
							A-B-C	D								
6	7															
GENERAL HOSPITALS																
Chester	Liberty	1	1	0	1	10	10	0	-	0	10	0	10			
Havre	Hill	2	2	0	2	187	118	20	-	49	126	0	77			
Big Sandy	Chouteau	1	1	0	0	9	0	0	-	9	9	0	0			
TOTAL		4	4	0	3	206	128	20	-	58	145	0	87	40	40	61
LONG-TERM CARE NURSING HOMES																
Chester	Liberty	1	1	0	0	20	0	0	-	20	20	0	0			
Havre	Hill	3	1	0	0	91	31	0	-	60	47	0	0			
Big Sandy	Chouteau	1	1	0	0	22	0	0	-	22	22	0	0			
Harlem	Blaine	1	1	0	0	39	0	0	-	39	39	0	0			
TOTAL		6	4	0	0	172	31	0	-	141	128	0	0	110	110	44

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DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA

I-3, Havre Intermediate

Montana

5. FISCAL YEAR  
1967

2,781

2,781

34,800

31,600

LOCATION

NO. OF FACILITIES

NO. OF BEDS EXISTING

NO. OF BEDS PROGRAMED

% NEED MET

TOTAL EXCESS  
BEDS IN AREA  
(Col. 12-Col. 17)

CATEGORY  
COMMUNITY

NAME OF  
COUNTY

TOTAL  
EXISTING

TOTAL  
NEEDED

TO BE  
ADDED

TO BE  
MODERNIZED

TOTAL  
EXISTING

NONCONFORMING

STATE  
STANDARDS

CONFORM-  
ING

TOTAL  
NEEDED

TO BE  
ADDED

TO BE  
MODERNIZED

CONSTRUC-  
TION

MODERN-  
IZATION

DIAGNOSTIC OR  
TREATMENT CENTERS

Big Sandy

Chester

Havre

Chouteau

Liberty

Hill

TOTAL

REHABILITATION  
FACILITIES

Havre

Hill

TOTAL

MENTAL FACILITIES

Havre

Hill

Refer to 1966-1967 Montana State Plan for Community Mental Health  
Center Construction.



IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)						
					A	B	C	D							
										11	12	13			
6	7	8	9	10	11	12	13	14	15	16	17	18			
<b>GENERAL</b>															
Liberty County	<sup>2600</sup> Liberty	Chester	NPA	10	0	10	0	0	-	0	430	2,347			
Kennedy Deaconess	Hill <sup>19306</sup>	Havre	NPA	97	0	36	0	16	-	45	2,954	17,447			
Sacred Heart	Hill	Havre	NPA	90	0	61	21	4	-	4	3,093	14,667			
Community Health Fac.	Chouteau <sup>7400</sup>	Big Sandy	NPA	9	0	0	0	0	-	9	177	1,362			
AREA TOTAL				206	0	107	21	20	-	58	6,654	35,823			
<b>LONG-TERM CARE NURSING HOMES</b>															
Liberty Co. Nsg. Home	Liberty	Chester	Co.	20	0	0	0	0	-	20	4	7,352			
Harlem Rest Home	Blaine	Harlem <sup>12</sup>	Prop	39	0	0	0	0	-	39	24	14,108			
Mary Sands Nsg. Home	Chouteau	Big Sandy <sup>13</sup>	Prop	22	0	0	0	0	-	22	15	6,526			
Sixth Ave. Rest Home	Hill	Havre <sup>14</sup>	Prop	13	0	0	13	0	-	0	4	4,360			
Havre Rest Home	Hill	Havre <sup>15</sup>	Prop	18	0	18	0	0	-	0	4	6,570			
Lutheran Home of Good Shepard	Hill	Havre	NPA	60	0	0	0	0	-	60	Opened 2/1/67				
AREA TOTAL				172	0	18	13	0	-	141	51	38,916			

# DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2 STATE		3. FISCAL YEAR				
R-11, Dillon		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	9.8	10.7	11,035	1126	33	51		
LONG-TERM CARE FACILITIES	1.18	1.18	8,254	6995	23	35		
AREA NARRATIVE								

This service area consists of Beaverhead County and the greater portion of Madison County. This is mountainous area with transportation routes following the valleys. Transportation in general is good. The principal industries of the area are agriculture, livestock, and mining. This is also a recreational area and is noted for its excellent hunting and fishing. The larger communities in the area are Dillon, Twin Bridges, Sheridan and Ennis. The Western Montana College is located at Dillon.

Programmed for modernization are the Barrett Hospital at Dillon for 19 beds and the Madison Valley Hospital at Ennis.

In the long-term care category no additional beds are programmed since adequate beds are available.

1/ Population age 65 and over.

1. AREA

R-11, Dillon

4. STATE

Montana

5. FISCAL YEAR

1967

LOCATION

2. TOTAL CIVILIAN POPULATION

3. CIVILIAN POPULATION

PROJECED

NO. OF BEDS PROGRAMED

% NEED MET

TOTAL EXCESS BEDS IN AREA

CATEGORY COMMUNITY	NAME OF COUNTY	NO. OF FACILITIES										NO. OF BEDS EXISTING										CONFORM- ING	NO. OF BEDS PROGRAMED				CONSTRUC- TION	MODERN- IZATION	TOTAL EXCESS BEDS IN AREA
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING				TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	% NEED MET															
							FEDERAL STANDARDS		STATE STANDARDS																				
							A-B-C	D																					
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22													
<u>GENERAL HOSPITALS</u>																													
	Dillon	1	1	0	1	19	0	-	0	28	9	19																	
	Sheridan	1	1	0	0	9	0	-	-	9	0	0																	
	Ennis	1	1	0	1	14	0	7	-	7	14	0	7																
	TOTAL	3	3	0	2	42	19	7	-	16	51	9	26	31	38	0													
<u>LONG-TERM CARE NURSING HOMES</u>																													
	Dillon	1	1	0	0	39	0	0	-	39	20	0	0																
	Sheridan	1	1	0	0	38	0	0	-	38	15	0	0																
	TOTAL	2	2	0	0	77	0	0	-	77	35	0	0	220	220	42													
<u>DIAGNOSTIC OR TREATMENT CENTERS</u>																													
	Dillon	1	1	0	1																								
	Ennis	1	1	0	1																								
	Sheridan	1	1	0	0																								
	TOTAL	3	3	0	2									33	33														



IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

ST-16-55

6 CATEGORY  
NAME OF FACILITY

7 NAME  
OF  
COUNTY

8 NAME  
OF  
CITY  
OR  
TOWN

9 CONTROL

10 TOTAL  
CAPACITY

11 BY FEDERAL STANDARDS

A

B

C

D

14 BY STATE  
STANDARDS  
(Optional)

15 CONFORMING

16 ADMISSIONS  
OR  
DISCHARGES  
(Including  
New-Born)

6

7

8

9

10

11

12

13

14

15

16

17

GENERAL

Barrett Hospital

Beaverhead

Dillon

NPA

19

0

19

0

0

-

0

1,000

6,048

Ruby Valley Hospital

Madison

Sheridan

NPA

9

0

0

0

0

-

9

602

2,702

Madison Valley

Madison

Ennis

NPA

14

0

0

0

7

-

7

389

2,285

AREA TOTAL

42

0

19

0

7

-

16

1,991

11,035

LONG-TERM CARE  
NURSING HOMES

Eventide of Dillon

Beaverhead

Dillon

Prop

39

0

0

0

0

-

39

40

4,551

Madison County  
Nursing Home

Madison

Sheridan

Co.

38

0

0

0

0

-

38

19

3,703

AREA TOTAL

77

0

0

0

0

-

77

59

8,254

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA	2. STATE		3. FISCAL YEAR					
	Montana		1967					
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	27.1	31.0	21,274	785	67	93		
LONG-TERM CARE FACILITIES	2.41	2.41	(13,845)	13,056	2/ 86	106		

AREA NARRATIVE

This service area consists of Gallatin County only which is mostly mountainous with fertile valleys. The highways and railroads follow the valleys, with good transportation patterns. The chief industries are agriculture, livestock, logging, lumber products, mining, dairy products and some manufacturing. Montana State University is located at Bozeman.

1  
2  
3

The Bozeman Deaconess Hospital, which serves this area, is programmed for modernization.

A 14-bed nursing home addition is under construction at Hillcrest in Bozeman which, when completed, will provide 20 nursing home beds in that facility. While six beds are programmed for modernization at Three Forks, it is not anticipated that this will be done since the facility is in need of replacement.

1/ Population age 65 and over.

2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



DEPARTMENT OF  
HEALTH, EDUCATION AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGE 15 AND OVER		4. STATE		5. FISCAL YEAR																		
R-12, Bozeman		CURRENT		PROJECTED		CURRENT		PROJECTED																		
		27,100		31,000		2,410		2,410																		
								1967																		
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES						NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED & NEEDED						TOTAL BEDS IN AREA						
		TOTAL EXISTING		TOTAL NEEDED		TO BE ADDED		TO BE MODERNIZED		NONCONFORMING				CONFORM- ING		TOTAL NEEDED		TO BE ADDED			TO BE MODERNIZED		CONSTRUC- TION		MODERN- IZATION	
		8	9	10	11	12	13	14	15	16	17	18	19	20	21	22										
GENERAL HOSPITALS	Bozeman	Gallatin	1	1	0	1	102	102	0	-	0	93	0	93												
			1	1	0	1	102	102	0	-	0	93	0	93												
			TOTAL																							
LONG-TERM CARE NURSING HOMES	Bozeman	Gallatin	3	2	0	0	100	0	0	-	100	106	0	0												
			1	1	0	0	15	15	0	-	0	0	6													
			TOTAL	4	3	0	0	115	15	0	-	100	106	0	6	94	94	9								
DIAGNOSTIC OR TREATMENT CENTERS	Bozeman	Gallatin	1	1	0	1																				
			1	1	0	1																				
			TOTAL																							
MENTAL FACILITIES	Refer to 1965-1967	Montana State Plan for Community Mental Health Centers Construction.																								



3. AREA  
R-12, Bozeman

4. PERIOD COVERED BY INVENTORY  
January 1, 1965, - December 31, 1965

5. Page  
of

CATEGORY NAME OF FACILITY	IDENTIFICATION		NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION							STATISTICS	
	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING BY FEDERAL STANDARDS				CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS
					A	B	C	D			
6	7	8	9	10	11	12	13	14	15	16	17
<u>GENERAL</u>											
Bozeman Deac. Hosp.	Gallatin	Bozeman	NPA	102	0	102	0	0	-	0	3,824
AREA TOTAL				102	0	102	0	0	-	0	21,274
<u>LONG-TERM CARE NURSING HOMES</u>											
Gallatin County Rest Home	Gallatin	Bozeman	Co.	34	0	0	0	0	-	34	1,942
Florence Conv. Home	Gallatin	Bozeman	Prop	46	0	0	0	0	-	46	6,668
Three Forks Nursing Home	Gallatin	Three Forks	Prop	15	15	0	0	0	-	0	4,169
Hillcrest	Gallatin	Bozeman	NPA	6	0	0	0	0	-	6	1,066
Hill crest	Gallatin	Bozeman	NPA	14uc	0	0	0	0	-	14uc	-
AREA TOTAL				115	15	0	0	0	-	100	13,845
<u>MENTAL FACILITIES</u>											
uc - Under Construction.	Refer to 1966-1967 Montana State Plan for Community Mental Health Center Construction.										

This service area is comprised of Broadwater and Meagher Counties, the greater part of Lewis and Clark County, and approximately one-half of Jefferson County. This is mostly mountainous area with good transportation by highway, railroads and air. Next to Helena, the larger communities are Boulder, Townsend and White Sulphur Springs. Helena is the trade center and hospital center for the area. Helena is the location of Carroll College, the State Capitol and various Federal offices. A lead-zinc smelter is located at East Helena. The industries in the area include agriculture, livestock, meat packing, smelting, oil products distribution, mining, logging and lumber products, and some manufacturing.

The Veteran's Administration operates a hospital at Fort Harrison (approximately six miles west of Helena) which has the usual limitations. The largest hospitals are St. Peter's Hospital and St. John's Hospital. A new St. Peter's Hospital is currently under construction, which, when completed, will replace the old facility. This will provide 82 general hospital beds, 10 psychiatric beds and 19 long-term care beds. St. John's has completed a 10-bed addition and a 25-bed nursing home unit. Programmed for modernization are 77-beds at St. John's Hospital and Shodair Hospital at Helena; 18 beds at Townsend and 8 beds at White Sulphur Springs.

In the long-term care category, a 25-bed nursing home unit has been completed and placed into operation at St. John's Hospital in Helena and a 19-bed unit is included in the construction of the new St. Peter's Hospital. Programmed for modernization are 39 beds at Helena and 6 beds at White Sulphur Springs with 6 beds to be added at White Sulphur Springs and 12 beds needed at Townsend.

- 1/ Population age 65 and over.
- 2/ Use rate of 13,056 is average







1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION				4. PROJECTED		5. FISCAL YEAR		6. STATE																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
I-4, Helena Intermediate		CURRENT		PROJECTED		CURRENT		PROJECTED		1966		1967		Montana																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	
		36,300		39,900		3,767		3,767																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																							
CATEGORY	COMMUNITY	LOCATION	NO. OF FACILITIES						NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED						TOTAL EXCESS BEDS IN AREA (Col. 17-Col. 17)																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
			TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	NONCONFORMING			CONFORMING			TOTAL NEEDED			TO BE ADDED			TO BE MODERNIZED			CONSTRUCTION			LOCATION																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																		

\*Refer to 1966-1967 Montana State Plan for Community Mental Health Centers Construction.

3. AREA  
I-4, Helena Intermediate

4. PERIOD COVERED BY INVENTORY  
January 1, 1965 to December 31, 1965

5. Page of Page

CATEGORY NAME OF FACILITY	IDENTIFICATION		NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION							STATISTICS	
	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING BY FEDERAL STANDARDS					CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)
					A	B	C	D	BY STATE STANDARDS (Optional)		
6	7	8	9	10	11	12	13	14	15	16	17
<u>GENERAL</u>											
	*Broadwater Hospital	Broadwater	Prop	23	23	0	0	0	-	0	546
	Mountainview Mem.	Meagher	NPA	8	0	8	0	0	-	0	278
	St. John's Hospital	Lewis & Clark	NPA	75	0	65	0	0	-	10	3,120
	St. Peter's Hospital	Lewis & Clark	NPA	(73)	(73)	0	0	0	-	0	2,834
	St. Peter's Hospital	Lewis & Clark	NPA	82uc	0	0	0	0	-	82uc	19,552
	Shodair	Lewis & Clark	NPA	23	0	23	0	0	-	0	1,009
		29100									5,978
<u>AREA TOTAL</u>				211	23	96	0	0	-	92	7,787
<u>LONG TERM CARE NURSING HOMES</u>											
Mountainview Mem. Hospital Cooney Convalescent Home St. John's Hospital St. Peter's Hospital Alhambra Manor	Meagher	Wh. Sul. Spgs	NPA	6	0	6	0	0	-	0	5
	Lewis & Clark	Helena	Co.	33	0	33	0	0	-	0	67
	Lewis & Clark	Helena	NPA	25	0	0	0	0	-	25	Opened 11/17/65
	Lewis & Clark	Helena	NPA	19uc	0	0	0	0	-	19uc	
	Jefferson	Clancy	Prop.	39	0	0	0	0	-	39	47
<u>AREA TOTAL</u>				122	0	39	0	0	-	83	119
<u>uc - Under Construction</u>											
<u>AREA TOTAL</u>											15,989



DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA	2. STATE		3. FISCAL YEAR	
	Montana		1967	
	CIVILIAN POPULATION (In thousands)		ADJUSTMENT (Explain in Area Narrative)	
CATEGORY	CURRENT	PROJECTED	BED NEED	
	5	6	GEN. $\frac{\text{Col. 9}}{.80} + 10$	LTC. $\frac{\text{Col. 9}}{.90} + 10$
4				
GENERAL HOSPITALS	79.4	84.4	1,391	412
LONG-TERM CARE FACILITIES	8.50	8.50	13,056	348

AREA NARRATIVE

This area consists of Silver Bow, Deer Lodge, and Granite Counties and portions of Madison, Jefferson and Powell Counties. This is mountainous country but has good transportation by highway railroad and air. The operations of the Anaconda Copper Mining Company at Butte and Anaconda include mining, milling, smelting and refining. Other industries in the area include mining and milling, agriculture, livestock, meat packing, logging and wood products and some manufacturing. The Montana College of Mineral Science and Technology (formerly Montana School of Mines) is located at Butte. Butte is also the trade center and hospital center in the area.

The area is served by two hospitals in Butte and other hospitals located at Anaconda, Deer Lodge and Philipsburg. St. Joseph's Hospital at Deer Lodge was closed following the completion of construction and the opening of the Powell County Memorial Hospital. Other hospitals include the Montana State Hospital (mental) at Warm Springs and the State Pulmonary Disease Hospital at Galen.

General hospitals programmed for modernization include 8 beds at Butte, 3 beds at Anaconda and 10 beds at Philipsburg. In the long-term care category 118 beds are programmed for modernization which include 72 beds at Butte and 46 beds at Anaconda. The plan provides for 40 beds at Deer Lodge.

- 1/ Population age 65 and over.
- 2/ Use Rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



STATE

1. AREA

I-5, Butte Intermediate

CURRENT

79,400

PROJECTED

84,400

CURRENT

8,496

Montana

5. FISCAL YEAR

1967

LOCATION

CATEGORY  
COMMUNITY

6

7

NAME OF  
COUNTY

NO. OF FACILITIES

TOTAL  
EXISTING

8

TOTAL  
NEEDED

9

TO BE  
ADDED

10

TO BE  
MODERNIZED

11

TOTAL  
EXISTING

12

NO. OF BEDS EXISTING

NONCONFORMING

FEDERAL  
STANDARDS

A-B-C

D

STATE  
STANDARDS

13

14

15

CONFORM-  
ING

16

TOTAL  
NEEDED

17

TO BE  
ADDED

18

TO BE  
MODERNIZED

19

CONSTRUC-  
TION

20

MODERN-  
IZATION

21

TOTAL EXCESS  
BEDS IN AREA  
(Col. 12-Col. 17)

22

GENERAL HOSPITALS

Butte

Silver Bow

Anaconda

Deer Lodge

Deer Lodge

Powell

Philipsburg

Granite

TOTAL

LONG TERM CARE  
NURSING HOMES

Butte

Silver Bow

Anaconda

Deer Lodge

Deer Lodge

Powel 1

TOTAL

1. AREA		2. TOTAL CIVILIAN POPULATION			3. CIVILIAN POPULATION AGE 65 AND OVER:			4. STATE							
		CURRENT		PROJECTED	CURRENT		PROJECTED	5. FISCAL YEAR							
I-5, Butte (Statewide)		79,400 (area) 696,000 (state)	84,400 (area) 753,000 (state)		8,500 67,000	85,000 67,000		Montana 1967							
LOCATION		NO. OF FACILITIES			NO. OF BEDS EXISTING			NO. OF BEDS PROGRAMMED TO BE ADDED							
COUNTY	NAME OF COUNTY	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUCTION	MODERNIZATION	
							FEDERAL STANDARDS		STATE STANDARDS						
							A-B-C	D							
5	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
Refer to 1966-1967 Montana State Plan for Community Mental Health Centers Construction.															
MENTAL FACILITIES															
Warm Springs	Deer Lodge	1	1	0	1	1,479	1,343	0	-	136	1,706 <sup>1/</sup>	227	1,343		
TOTAL		1	1	0	1	1,479	1,343	0	-	136	1,706	227	1,343	8	9
TUBERCULOSIS FACILITIES															
Galen	Deer Lodge	1	1	0	0	245	0	0	-	245	186 <sup>2/</sup>	0	0		
TOTAL		1	1	0	0	245	0	0	-	245	186	0	0	132	132
1/	State-Wide.	Bed need determined by dividing the current average daily census by 0.90 occupancy.													
2/	State-Wide.	Bed need determined by dividing the current average daily census by 0.80 occupancy.													

4. STATE

2. CIVILIAN POPULATION AGE 65 AND OVER

2. TOTAL CIVILIAN POPULATION

1. AREA

Montana

PROJECTED

CURRENT

PROJECTED

CURRENT

5. FISCAL YEAR

8,496

8,496

84,400

79,400

I-5, Butte Intermediate

LOCATION

NO. OF BEDS PROGRAMED

NO. OF BEDS EXISTING

NO. OF FACILITIES

NAME OF COUNTY

CATEGORY COMMUNITY

CONSTRUCTION

TO BE ADDED

NEEDED

CONFORMING

STANDARDS

FEDERAL STANDARDS

NONCONFORMING

A-B-C

D

TOTAL EXISTING

TOTAL NEEDED

TO BE ADDED

TO BE MODERNIZED

TOTAL EXISTING

TOTAL NEEDED

TO BE ADDED

TO BE MODERNIZED

NEEDED

CONSTRUCTION

MODERNIZATION

22

21

20

19

18

17

16

15

14

13

12

11

10

9

8

7

6

5

4

3

2

1

0

0

0

0

0

0

0

0

REHABILITATION FACILITIES

Butte

Silver Bow

TOTAL

-95-

DIAGNOSTIC OR TREATMENT CENTERS

Butte

Silver Bow

Anaconda

Deer Lodge

Deer Lodge

Powell

Philipsburg

Granite

TOTAL



AREA I-5, Butte

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5. Page of

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	STATISTICS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)							
					A	B	C	D	15								
											11	12	13	14			
6	7	8	9	10	11	12	13	14	15	16	17	18					
GENERAL HOSPITALS																	
Granite County	Granite <sup>3000</sup>	Philipsburg	Co.	10	0	10	0	0	-	0	393	1,740					
Powell Co. Memorial	Powell <sup>7400</sup>	Deer Lodge	NPA	35	0	0	0	0	-	35	851	8,183					
St. Joseph's	Powell	Deer Lodge	NPA	(25)	(25)	0	0	0	-	0	2/	2/					
472 St. James Community	Silver Bow	Butte	NPA	202	0	0	8	0	-	194	8,637	58,837					
Silver Bow General	Silver Bow	Butte	Co.	86	0	0	0	0	-	86	3,034	24,183					
St. Ann's Hospital	Deer Lodge <sup>18500</sup>	Anaconda	NPA	67	0	0	3	0	-	64	1,924	17,467					
AREA TOTAL				400	0	10	11	0	-	379	14,839	110,410					
LONG-TERM CARE NURSING HOMES																	
Mountain View Rest Home	Deer Lodge	Anaconda	Co.	16	16	0	0	0	-	0	15	5,664					
St. Ann's Rest Home	Deer Lodge	Anaconda	NPA	30	30	0	0	0	-	0	51	6,866					
Crest Nursing Home	Silver Bow	Butte	Prop	60	0	0	0	0	-	60	42	9,293					
Silver Bow General	Silver Bow	Butte	Co.	56	0	0	0	0	-	56	195	18,109					
Silver Bow Annex Nursing Home	Silver Bow	Butte	Co.	72	72	0	0	0	-	0	57	23,360					
AREA TOTAL				234	118	0	0	0	-	116	360	63,292					
1/ Closed July 20, 1965																	
2/ Included in Powell County Memorial Hospital Statistics.																	

AREA I-5, Butte

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5. Page of Pages

IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION										STATISTICS	
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS			
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)						
					A	B	C	D							
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>MENTAL FACILITIES</u>	See State Construction Plans for Community Mental Health Centers and Facilities for the Mentally Retarded.														
Montana State Hospital	Deer Lodge	Warm Springs	St.	1,479	225	712	406	0	-	136	2,200 1/	560,275 1/			
AREA TOTAL				1,479	225	712	406	0	-	136	2,200	560,275			
<u>TUBERCULOSIS</u>															
State Pulmonary Disease Hospital	Deer Lodge	Galen	St.	245 2/	0	0	0	0	-	245	328 3/	54,302			
AREA TOTAL				245	0	0	0	0	-	245	328	54,302			
1/ On basis of 1,690 beds serving on a state-wide basis. 2/ No plant evaluation was made of this facility. 3/ Includes 310 patients from other custodial Institutions. The hospital also has a custodial care unit for the Mentally Retarded for 98 beds which rendered services to 95 persons for a total of 35,150 resident days of service.															

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-13, Lewistown		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	17.8	16.6	13,829	777	35	54		
LONG-TERM CARE FACILITIES	2.32	1/ 2.32	11,249	4,849	31	44		
AREA NARRATIVE								

This area consists of Fergus and Petroleum Counties and the greater part of Judith Basin County. This area comprises both mountainous and plains area with generally good transportation routes. The main industries in the area are agriculture, livestock and oil production.

The area is served by the hospital at Lewistown which is in need of replacement. Accordingly, plans provide for the replacement of 54 beds.

In the long-term care category, the plan indicates modernization of 5 beds. However, this is unlikely since the Valle Vista Manor at Lewistown has the potential of utilizing additional existing beds through additional staffing. The Montana Center for the Aged is also located in Lewistown. However, this does not render community service, since patients admitted to this facility must legally be committed to the Montana State Hospital at Warm Springs, and then transferred to Lewistown.

1/ Population age 65 and over.



17,800

—

11	34	22	TOTAL EXCESS BEDS IN AREA (Col. 12 - Col. 17)
----	----	----	---

IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION										STATISTICS		
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					BY STATE STANDARDS (Optional)	CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS			
					BY FEDERAL STANDARDS											
					A	B	C	D								
6	7	8	9	10	11	12	13	14	15	16	17	18				
<u>GENERAL</u>																
St. Joseph Hospital	Fergus	Lewistown	NPA	88	67	21	0	0	-	0	2,272	13,829				
AREA TOTAL				88	67	21	0	0	-	0	2,272	13,829				
<u>LONG-TERM CARE NURSING HOMES</u>																
St. Joseph's Rest Home Valley Vista Manor	Fergus	Lewistown Lewistown	NPA NPA	16 39	0 0	16 0	0 0	0 0	- -	0 39	30 30	5,638 5,611				
AREA TOTAL				55	0	16	0	0	-	39	60	11,249				
<u>MENTAL FACILITIES</u>																
Montana Center for the Aged	Fergus	Lewistown	St.	146	0	0	0	0	-	146	18	52,733				
AREA TOTAL				146	0	0	0	0	-	146	18	52,733				

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-14, Harlowton		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	3.7	3.3	3,850	1,041	9	22		
LONG-TERM CARE FACILITIES	0.50	1/ 0.50	(3,373)	13,056	2/ 18	30		

AREA NARRATIVE

This area, formerly included in an area with Musselshell County, consists of Wheatland County and the western portion of Golden Valley County. This area is both mountainous and rolling country and is served by good highways. Industries in the area are chiefly agriculture, livestock and oil productions.

The area is served by a small general hospital at Harlow ton which is in need of modernization of 19 beds with 3 beds to be added. The 12 nursing home beds in the hospital are in need of modernization with 18 beds to be added.

Golden Valley, a portion of which is included in this area, has no resident physician.

- 1/ Population age 65 and over
- 2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



DEPARTMENT OF  
HEALTH, EDUCATION AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER				4. STATE													
		CURRENT		PROJECTED		CURRENT		PROJECTED		MONTANA													
		3,700		3,300		504		504		1967													
LOCATION		NO. OF FACILITIES						NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED						NEED MET		(Col. 12-Col. 17)	
CATEGORY	COMMUNITY	NAME OF COUNTY	7	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORMING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUCTION	MODERNIZATION	TOTAL EXCESS BEDS IN AREA					
									A-B-C	D	STATE STANDARDS												
GENERAL HOSPITALS	Harlowton	Wheatland	1	1	1	0	1	19	19	0	-	0	22	3	19			22					
TOTAL			1	1	1	0	1	19	19	0	-	0	22	3	19	0	0	0					
LONG-TERM CARE NURSING HOMES	Harlowton	Wheatland	1	1	1	0	1	12	12	0	-	0	30	18	12			30					
TOTAL			1	1	1	0	1	12	12	0	-	0	30	18	12	0	0	0					
DIAGNOSTIC AND TREATMENT CENTERS	Harlowton	Wheatland	1	1	1	0	1																
TOTAL			1	1	1	0	1									0	0						

AREA **R-14, Harlowton**

4. PERIOD COVERED BY INVENTORY

**January 1, 1965 - December 1, 1965**

5.

Page **1** of **1**

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATUS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING							CONFORMING	ADMISSIONS OR DISCHARGES (Including New-born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)				
					A	B	C	D	15					
											11			
6	7	8	9	10	11	12	13	14	15	16	17	18		
<u>GENERAL</u>														
Wheatland Memorial	3000 Wheatland	Harlowton	NPA	19	0	19	0	0	-	0	436	3,850		
AREA TOTAL				19	0	19	0	0	-	0	436	3,850		
<u>LONG-TERM CARE NURSING HOMES</u>														
Wheatland Mem. Hosp.	Wheatland	Harlowton	NPA	12	0	12	0	0	-	0	18	3,373		
AREA TOTAL				12	0	12	0	0	-	0	18	3,373		

-103-

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-15, Roundup		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	5.4	4.5	2,643	489	6	18		
LONG-TERM CARE FACILITIES	0.77	0.77	----	13,056 $\frac{2}{1}$	28	41		
AREA NARRATIVE								

This area includes Musselshell County and the Eastern portion of Golden Valley County. It has a rolling terrain and is served by good highways. Industries in the area include agriculture, livestock, coal mining and some oil production.

Due to the curtailment of coal mining operations in the area, the younger people have gone elsewhere for employment. This has resulted in a high percentage of persons aged 65 and over with Musselshell having 14.3% and Golden Valley, 14.5%. There are only three other counties in the state having higher percentage with a maximum of 15.2%.

Construction for the modernization of the Roundup Memorial Hospital and a 19 bed nursing home additions at Roundup is nearing completion. This leaves an un-met need for 25 nursing home beds for this area.

- 1/ Population age 65 and over.
- 2/ Use rate of 13.056 is average of sixteen (16) service areas having reasonable experience.



STATE

CIVILIAN POPULATION AGE 65 AND OVER

TOTAL CIVILIAN POPULATION

AREA

Montana

R-15, Roundup

FISCAL YEAR

1967

LOCATION

NO. OF BEDS EXISTING

NO. OF BEDS PROGRAMED

% NEED MET

TOTAL EXCESS BEDS IN AREA

CATEGORY COMMUNITY	NAME OF COUNTY	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING					CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION	TOTAL EXCESS BEDS IN AREA
							FEDERAL STANDARDS				STATE STANDARDS							
							A-B-C		D									
							13	14		15								
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		
<u>GENERAL HOSPITALS</u>	Musselshell	1	1	0	0	17	0	0	-	17	18	1	0					
	TOTAL	1	1	0	0	17	0	0	-	17	18	1	0	94	100	0		
<u>LONG TERM CARE NURSING HOMES</u>	Musselshell	1	1	0	0	16	0	0	-	16	41	25	0					
	TOTAL	1	1	0	0	16	0	0	-	16	41	25	0	39	100	0		
<u>DIAGNOSTIC OR TREATMENT CENTERS</u>	Musselshell	1	1	0	0													
	TOTAL	1	1	0	0									100	100			

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR  
1967

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 1, 1965

5.

Page 1 of 1 pages

AREA

R-15, Roundup

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)							
					A	B	C	D	15								
											11	12	13	14			
6	7	8	9	10	11	12	13	14	15	16	17	18					
<u>GENERAL</u>																	
Roundup Memorial	Musselshell	Roundup	NPA	17	0	0	0	0	-	17	387	2,643					
AREA TOTAL	4900			17	0	0	0	0	-	17	387	2,643					
<u>LONG-TERM CARE</u>																	
<u>NURSING HOMES</u>																	
Roundup Memorial (addition)	Musselshell	Roundup	NPA	16 uc	0	0	0	0	-	16 uc	---	---					
AREA TOTAL				16	0	0	0	0	-	16	---	---					
uc - Under Construction																	

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-16, Livingston		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	16.3	16.7	13,679	839	38	58		
LONG-TERM CARE FACILITIES	2.03 $\frac{1}{1}$	2.03 $\frac{1}{1}$	(9,206)	13,056 $\frac{2}{1}$	73	91		
AREA NARRATIVE								

The service area consists of Sweet Grass and Park Counties which are located in mountainous area. Transportation is good, being served by highways and railroad. The main industries include agriculture, live-stock, logging and some mining. "Dude Ranches" are also located in this area. Livingston is a railroad division point for the Northern Pacific Railroad and is the gateway to the north entrance of Yellowstone National Park.

The area is served by two hospitals, one at Big Timber with 17 beds, the other at Livingston with 58 beds. Both hospitals are programmed for modernization.

A new 32-bed nursing home was constructed at Big Timber and placed into operation July 1, 1965. The Livingston Pioneer Home at Livingston is in need of replacement and accordingly 44 long-term care beds are programmed for Livingston.

1/ Population age 65 and over.

2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



SILVER SPRING, Md., Jan. 20.

PHS-2037  
REV. 1-65

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 11-19-01 BY 60322 UCBAW

FORM APPROVED  
JUL 74 AU

3. AREA

R-16, Livingston

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5.

Page 1 of 1

1965

CATEGORY NAME OF FACILITY	IDENTIFICATION		NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION										STATISTICS		
	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)	CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	SATIS- FACTION RATING	17	16	15
					A	B	C	D							
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
<u>GENERAL</u>															
Livingston Memorial Sweet Grass Community	Park 13/60 Sweet Grass 3200	Livingston Big Timber	NPA NPA	58 17	0 0	58 17	0 0	0 0	- -	0 0	1,902 546	10,960 2,719			
AREA TOTAL				75	0	75	0	0	-	0	2,448	13,679			
<u>LONG-TERM CARE</u>															
<u>NURSING HOMES</u>															
Livingston Pioneer Home	Park	Livingston	Prop	15	15	0	0	0	-	0	4	7,652			
Sweet Grass Co. Pioneer Home	Sweet Grass	Big Timber	Co'y	32	0	0	0	0	-	32	51	1,554			
AREA TOTAL				47	15	0	0	0	-	32	55	9,206			

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR					
R-17, Columbus		Montana		1967					
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED		ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED				GEN. $\frac{\text{Col. 9}}{.80} + 10$	LTC. $\frac{\text{Col. 9}}{.90} + 10$		
4	5	6	7	8	9	10	11	12	
GENERAL HOSPITALS	5.3	5.2	5,508	1039	15	29			
LONG-TERM CARE FACILITIES	$0.63\frac{1}{-}$	$0.63\frac{1}{-}$	10,950	17381	30	43			

AREA NARRATIVE

This area consists of Stillwater County. It has mountains with valleys and otherwise rolling terrain. It is served by good roads and railroad. The industry in the area includes mining, agriculture, livestock and wood products manufacturing.

The Stillwater Community Hospital serves this area. This was previously listed as a 22-bed hospital. However, on the basis of minimum room area requirements, it has a capacity of 11 beds, which results in the hospital operating at an occupancy of 137%. This facility is programmed for modernization and additional beds.

In the long-term care category, the existing facility is in need of replacement.

1/ Population age 65 and over.



1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGES 65 AND OVER		4. STATE		5. FISCAL YEAR		6. LOCATION		7. NAME OF COUNTY		8. NO. OF FACILITIES						9. NO. OF BEDS EXISTING						10. NO. OF BEDS PROGRAMED						11. NEEDS						12. MODERNIZATION		13. TOTAL EXCESS BEDS IN AREA	
R-17 Columbus		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED		5,300		5,200		630		630		1967		NO. OF BEDS EXISTING		NO. OF BEDS PROGRAMED		NEEDS		MODERNIZATION		TOTAL EXCESS BEDS IN AREA									
		CURRENT		PROJECTED</																																					

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR  
1967

3. AREA

R-17, Columbus

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5.

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pages

CATEGORY NAME OF FACILITY	IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION							STATISTICS	
	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING BY FEDERAL STANDARDS				CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS		
					A	B	C	D					
6	7	8	9	10	11	12	13	14	15	16	17	18	
<u>GENERAL</u>													
Stillwater Community	5300 Stillwater	Columbus	NPA	11	0	11	0	0	-	0	941	5,508	
AREA TOTAL				11	0	11	0	0	-	0	941	5,508	
<u>LONG TERM CARE</u>													
<u>NURSING HOMES</u>													
Fair Haven Home	Stillwater	Columbus 22	Prop	38	38	0	0	0	-	0	11	10,950	
AREA TOTAL				38	38	0	0	0	-	0	11	10,950	

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2 STATE		Montana		3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED		ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED				GEN. $\frac{\text{Col. 9}}{.80} + 10$	LTC. $\frac{\text{Col. 9}}{.90} + 10$		
4	5	6	7	8	9	10	11	12	
GENERAL HOSPITALS	7.9	6.4	7,014	888	16	30			
LONG-TERM CARE FACILITIES	$1\frac{7}{18}$	$1\frac{1}{18}$	- - -	13,056	42	57			
AREA NARRATIVE									

This area consists of Carbon County. This is mountainous and rolling country and is served by highways and railroads. Industries in this area include mining, agriculture, livestock raising and oil and natural gas production. This is also a recreation area for hunting, fishing and skiing. The Red Lodge-Cooke City Highway serves the North East Entrance to Yellowstone Park.

The curtailment of coal mining operations in the Red Lodge area resulted in the younger people moving elsewhere for employment. Due to this, Carbon County has 15.0% of its population age 65 and over which is the second highest percentage in Montana.

A project involving the modernization of the Carbon County Memorial Hospital and the construction of a 24-bed nursing home addition is currently underway. While 3 hospital beds and 33 long-term care beds are programmed, it is not anticipated that these will be constructed in the immediate future.

1/ Population age 65 and over.

2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



DEPARTMENT OF HEALTH, EDUCATION AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGES 65 AND OVER		4. STATE																		
R-18, Red Lodge		CURRENT	PROJECTED	CURRENT	PROJECTED	Montana																		
		7,900	6,400	1,180	1,180	1967																		
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES						NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED						NEED MET		TOTAL EXCESS BEDS IN AREA (Col. 12-Col. 17)		
		TOTAL EXISTING		TOTAL NEEDED		TO BE ADDED		TO BE MODERNIZED		NONCONFORMING		CONFORM- ING		TOTAL NEEDED		TO BE ADDED		TO BE MODERNIZED		CONSTRUC- TION			MODERN- IZATION	
		8	9	10	11	12	13	14	15	16	17	18	19	20	21	22								
GENERAL HOSPITALS																								
Red Lodge	Carbon	1	1	0	0	27	0	0	-	27	30	3	0											
TOTAL		1	1	0	0	27	0	0	-	27	30	3	0											
LONG TERM CARE NURSING HOMES																								
Red Lodge	Carbon	1	1	0	0	24	0	0	-	24	57	33	0											
TOTAL		1	1	0	0	24	0	0	-	24	57	33	0											
DIAGNOSTIC OR TREATMENT CENTERS																								
Red Lodge	Carbon	1	1	0	0																			
TOTAL		1	1	0	0																			

PHS-700-7  
RE  
MAY 1967  
SILVER SPRING, MARYLAND  
DEPARTMENT OF HEALTH, EDUCATION AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

3. AREA

R-18, Red Lodge

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5.

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IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)						
					A	B	C	D							
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>GENERAL</u>															
Carbon Co. Memorial	Carbon	Red Lodge	NPA	(27) 27 uc	0 0	(27) 0	0 0	0 0	-	0 27 uc	1,086	7,014			
AREA TOTAL				27	0	0	0	0	-	27	1,086	7,014			
<u>LONG TERM CARE NURSING HOMES</u>															
Carbon Co. Memorial	Carbon	Red Lodge	NPA	24 uc	0	0	0	0	-	24 uc					
AREA TOTAL				24	0	0	0	0	-	24	----	----			
uc - Under Construction															

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana			3. FISCAL YEAR	
R-19, Hardin							1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	10.0	10.2	3,307	331	9	22		
LONG-TERM CARE FACILITIES	0.74 <sup>1/</sup>	0.74 <sup>1/</sup>	(3,793)	13,056 <sup>2/</sup>	26	39		
AREA NARRATIVE								

This service area consists of Big Horn County. This is both mountainous and rolling country and is served by good highways and railroad. Industry in the area is chiefly agriculture and livestock raising.

The Crow Indian Reservation and the Tongue River Indian Reservation are in this service area. These are served by a 36-bed Public Health Service Indian Hospital at Crow Agency, 13 miles distant from Hardin.

The non-Indian population is served by the Big Horn County Memorial Hospital at Hardin which is an 18-bed general hospital with a 10-bed nursing home sub-unit. There is a need for 29 additional long-term care beds and modernization of the 10-bed sub-unit in the existing hospital.

1/ Population age 65 and over.

2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.





DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR

1967

4. PERIOD COVERED BY INVENTORY

5.

AREA

R-19 Hardin

Montana

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pages

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)							
					A	B	C	D								
										11	12	13	14			
6	7	8	9	10	11	12	13	14	15	16	17	18				
<u>GENERAL</u>																
Big Horn Co. Memorial	Big Horn	Hardin	NPA	18	0	0	0	0	-	18	809	3,307				
AREA TOTAL	16000			18	0	0	0	0	-	18	809	3,307				
<u>LONG-TERM CARE</u> <u>NURSING HOMES</u>																
Big Horn Co. Memorial	Big Horn	Hardin	NPA	10	10	0	0	0	-	0	18	3,793				
AREA TOTAL				10	10	0	0	0	-	0	18	3,793				

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2 STATE		Montana			3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED		
	CURRENT	P PROJECTED								
4	5	6	7	8	9	10	11	12		
GENERAL HOSPITALS	80.8	100.6	106,024	1312	362	462				
LONG-TERM CARE FACILITIES	5.97 <sup>1/</sup>	5.97 <sup>1/</sup>	(47,768)	13,056 <sup>2/</sup>	214	248				
AREA NARRATIVE										

This area consists of Yellowstone County which ranks highest in population of all the counties in the State. This, in general, is mountainous and otherwise has rolling terrain. It has good transportation facilities by good highways, air and railroad. The area has diversified industries including agriculture, livestock raising and marketing, meat packing, sugar refining, oil refining, trucking and some manufacturing. Billings is the trades center and medical center for South-Central Montana and Northern Wyoming. It is also the location of Eastern Montana College and Rocky Mountain College.

The area is served by two general hospitals at Billings. The previous revision of the State Plan listed the St. Vincent Hospital as having 202 beds. The decrease in bed count is due to remodeling. Both of the Billings hospitals are programmed for modernization.

The new Yellowstone County Nursing Home (60 beds) was opened to receive patients in November, 1966 resulting in the demolition of the Yellowstone County Convalescent Home. Since there is an excess of long-term care beds in this area, no additional beds are programmed in this category.

- 1/ Population age 65 and over.
- 2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.



DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA

I-6, Billings

2. TOTAL CIVILIAN POPULATION

CURRENT

80,800

PROJECTED

100,600

CURRENT

5,974

PROJECTED

5,974

Montana

3. FISCAL YEAR

1967

LOCATION

CATEGORY  
COMMUNITY

6

7

NAME OF  
COUNTY

Yellowstone

TOTAL

Billings

GENERAL HOSPITALS

LONG-TERM CARE

NURSING HOMES

Billings

Yellowstone

TOTAL

MENTAL FACILITIES

Billings

Yellowstone

TOTAL

TOTAL EXCESS  
BEDS IN AREA  
(Col. 12-Col. 17)

(continued)

1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGES 65 AND OVER		4. STATE														
I-6, Billings		CURRENT	PROJECTED	CURRENT	PROJECTED	Montana														
		80,800	100,600	5,974	5,974	1967														
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES						NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED	% NEED MET	TOTAL EXCESS BEDS IN AREA				
		TOTAL EXISTING		TOTAL NEEDED		TO BE ADDED		TO BE MODERNIZED		NONCONFORMING		CONFORM- ING STANDARDS	TOTAL NEEDED				TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION
		8	9	10	11	12	FEDERAL STANDARDS A-B-C	D	STATE STANDARDS											
6	7																	22		
REHABILITATION FACILITIES	Billings	1	1	0	0															
	Yellowstone																			
	TOTAL	1	1	0	0		No Inpatient Facilities 2/										100	100		
DIAGNOSTIC OR TREATMENT CENTERS	Billings																			
	Yellowstone	2	2	0	0															
	TOTAL	2	2	0	0											100	100			
1/ Refer to 1966-1967 Montana State Plan for Community Mental Health Centers Construction.																				
2/ Fourteen (14) beds available but not utilized for Rehabilitation.																				

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DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR  
1967

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

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1-6, Billings

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)						
					A	B	C	D							
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>GENERAL</u>															
Billings Deaconess St. Vincent's	Yellowstone Yellowstone	Billings Billings	NPA NPA	199 194	0 0	115 175	0 0	0 0	- -	84 19	9,048 9,048	53,126 52,898			
AREA TOTAL	807.00			393	0	290	0	0	-	103	18,096	106,024			
<u>LONG-TERM CARE NURSING HOMES</u>															
Glendeen Home Yellowstone Co. Nursing Home	Yellowstone Yellowstone	Billings <sup>23</sup> Billings	Prop Co.	18 60	0 0	0 0	0 0	0 0	- -	18 60	19 opened	6,482 11/66			
Yellowstone Convales- cent Home	Yellowstone	Billings	Co.	(36)	(36)	0	0	0	-	0	126	NA 1/			
Valley Nursing Home	Yellowstone	Billings <sup>23</sup>	Prop	50	0	0	0	0	-	50	91	4,845 2/			
New Western Manor	Yellowstone	Billings <sup>23</sup>	Prop	158	0	0	0	0	-	158	192	32,320			
Laurel Nursing Home	Yellowstone	Billings <sup>24</sup>	Prop	29	29	0	0	0	-	0	16	4,121			
AREA TOTAL				315	28	0	0	0	-	286	444	47,768			



3. AREA

I-6, Billings

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

5.

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of

2

pages

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										CONFORMING	ADMISSIONS OR DISCHARGES (Including New-born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)							
					A	B	C	D	15								
											11	12	13	14			
6	7	8	9	10	11	12	13	14	15	16	17	18					
<u>MENTAL FACILITIES</u>																	
Billings Deaconess Hosp.	Yellowstone	Billings	NPA	8	0	0	0	0	-	8	166	1,701					
AREA TOTAL				8	0	0	0	0	-	8	166	1,701					

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana			3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED		
	CURRENT	PROJECTED								
	4	5	6	7	8	9	10	11	12	
GENERAL HOSPITALS	22.7	21.7	11,153	491	29	47				
LONG-TERM CARE FACILITIES	1.47	1.47	-----	13,056	53	69				

AREA NARRATIVE

This area consists of Valley County. This is relatively flat country and has good transportation by highway, railroad and air. The major trade center is Glasgow. The area is primarily agriculture, stock raising, and generation of electric power from the Fort Peck Reservoir which is near Glasgow. The U. S. Air Force Base which is scheduled to be closed in 1968, is also located near Glasgow. A large part of the Fort Peck Indian Reservation is in the county.

The area is served by the Frances Mahon Deaconess Hospital at Glasgow. This facility is in need of modernization or replacement. A 30-bed addition to the hospital is currently under construction. The Air Force maintains a hospital at the air base which is restricted to air force personnel and dependants.

Programmed for construction is a 60-bed nursing home at Glasgow. There are currently no long-term care beds in the area.

- 1/ Population age 65 and over.
- 2/ Use rate of 13,056 is average of sixteen (16) service areas having reasonable experience.

1. AREA

R-20, Glasgow

2. TOTAL CIVILIAN POPULATION  
CURRENT PROJECTED  
3. CIVILIAN POPULATION AGE 67 AND OVER  
CURRENT PROJECTED

4. STATE

Montana

5. FISCAL YEAR

22,700

21,700

1,470

1,470

1967

LOCATION

LOCATION		NO. OF FACILITIES					NO. OF BEDS EXISTING							NO. OF BEDS PROGRAMED					1967	
CATEGORY COMMUNITY	NAME OF COUNTY	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING				CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION	TOTAL EXCESS BEDS IN AREA			
							FEDERAL STANDARDS		STATE STANDARDS											
							A-B-C	D												
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22				
<u>GENERAL HOSPITALS</u>																				
Glasgow	Valley	1	1	0	1	86	56	0	-	30	47	0								
TOTAL		1	1	0	1	86	56	0	-	30	47	0	17	64	64	39				
<u>LONG TERM CARE NURSING HOMES</u>																				
Glasgow	Valley	0	1	1	0	0	0	0	-	0	69	69	0							
TOTAL		0	1	1	0	0	0	0	-	0	69	69	0	0	0	0				
<u>DIAGNOSTIC OR TREATMENT CENTERS</u>																				
Glasgow	Valley	1	1	0	1															
TOTAL		1	1	0	1									0	0					
																(continued)				

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DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER:				4. STATE		5. FISCAL YEAR		6. TOTAL EXCESS BEDS IN AREA					
		CURRENT		PROJECTED		CURRENT		PROJECTED		MONTANA		1967							
		22,700		21,700		1,670		1,470											
LOCATION		NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				% NEED MET		TOTAL EXCESS BEDS IN AREA			
NAME OF COUNTY		TOTAL EXISTING		TOTAL NEEDED		TO BE ADDED		TO BE MODERNIZED		EXISTING		NONCONFORMING		CONFORMING		TOTAL NEEDED		TOTAL EXCESS BEDS IN AREA	
		8		9		10		11		12		FEDERAL STANDARDS		STATE STANDARDS		TOTAL NEEDED		TOTAL EXCESS BEDS IN AREA	
												A-B-C		D					
6		7																	
MENTAL FACILITIES		Refer to 1966-1967 Montana State Plan for Community Mental Health Centers Construction.																	
Glasgow		0		1		1		0		0		0		0		---		0	
TOTAL		0		1		1		0		0		0		0		---		0	

=126-

2. FISCAL YEAR  
1967

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1 pages

5. Page 1 of

COVERED BY INVENTORY  
January 1, 1965 - December 31, 1965

R-20, Glasgow

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

STATISTICS

ATEGORY	NAME OF FACILITY
1	1
2	2
3	3
4	4
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91	91
92	92
93	93
94	94
95	95
96	96
97	97
98	98
99	99
100	100

NAME  
OF  
CITY  
OR  
TOWNNAME  
OF  
COUNTYTOTAL  
CAPACITY

☐ D  
☐ C  
☐ B  
☐ A

BY STATE  
STANDARDS  
(Optional)

ADMISSIONS  
OR  
DISCHARGES  
(Excluding  
New-Born)

PATIENT  
DAYS

6



7

9

10

1

3

4

15

ie

17

CC

## GENERAL

Frances Mahon Deaconess

Glasgow

Valley

NPA

95

95

Q

C

1

C

11 153

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AREA TOTAL

PHS-708-2

NEW - 100%

## INVENTORY OF INPATIENT FACILITIES

FORM APPROVED:  
BUDGET BUREAU

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA			2. STATE			3. FISCAL YEAR		
R-21, Scobey			Montana			1967		
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED GEN. Col. 9 + 10 LTC. Col. 9 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	3.8	3.2	3,650	961	8	21		
LONG-TERM CARE FACILITIES	0.43 $\frac{1}{1}$	=0.43 $\frac{1}{1}$	-----	13,056 $\frac{2}{1}$	15	27		
AREA NARRATIVE								

This area consists of Daniels County which has gently rolling terrain. It is served by good highways. The largest community is Scobey. The chief industries are agriculture and stock raising.

The area is served by the Daniels Memorial Hospital, a 20-bed facility which has a newly constructed 19-bed nursing home unit. While the program indicates a need for one additional bed and modernization of 6 beds in the hospital category and an additional 8 nursing home beds in the long-term care category, it is not anticipated that this will be constructed in the immediate future.

1/ Population age 65 and over.

2/ Use rate of 13,050 is the average of sixteen (16) service areas having reasonable experience.





DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR

1967

3. AREA

R-21, Scobey

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1967

5.

Page 1

of 1

pages

IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION							STATISTICS		
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS	
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)				
					A	B	C	D					
6	7	8	9	10	11	12	13	14	15	16	17	18	
<u>GENERAL</u>													
Daniels Memorial	Daniels	Scobey	NPA	20	0	6	0	0	-	14	483	3,650	
AREA TOTAL	3800			20	0	6	0	0	-	14	483	3,650	
<u>LONG-TERM CARE</u> <u>NURSING HOMES</u>													
Daniels Memorial Hosp.	Daniels	Scobey	NPA	19	0	0	0	0	-	19	opened	11-23-66	
AREA TOTAL				19	0	0	0	0	-	19	----	-----	

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-22, Plenywood		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\frac{\text{GEN. Col. 9}}{.80} + 10$ $\frac{\text{LTC. Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	6.6	5.7	7,900	1,197	19	34		
LONG-TERM CARE FACILITIES	0.80 $\frac{1}{2}$	0.80 $\frac{1}{2}$	-----	13,056 $\frac{2}{2}$	29	42		
AREA NARRATIVE								

This area consists of Sheridan County which has gently rolling terrain. The area is served by good highways. The chief industries are agriculture, stock raising, and oil production.

The area is served by the Sheridan Memorial Hospital at Plentywood. The completion of an 8-bed hospital addition changes the bed count from 24 beds, as shown in the previous revision of the State Plan, to 32 beds. There is currently under construction a 27-bed nursing home addition to the hospital with modernization of the hospital. While the program indicates a need for two (2) hospital beds and fifteen (15) long-term care beds it is not anticipated that there will be added in the immediate future.

1/ Population age 65 and over.

2/ Use rate of 13,050 is the average of sixteen (16) service areas having reasonable experience.



DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER:				4. STATE										
R-22, Plentywood		CURRENT		PROJECTED		CURRENT		PROJECTED		Montana										
		6,600		5,700		799		799		1967										
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES						NO. OF BEDS EXISTING						NO. OF BEDS PROGRAMED				NEED MET		TOTAL EXCESS BEDS IN AREA
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION					
							FEDERAL STANDARDS		STATE STANDARDS											
							A-B-C	D												
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22				
<u>GENERAL HOSPITALS</u>																				
Plentywood	Sheridan	1	1	0	0	32	0	0	-	32	34	2	0							
TOTAL		1	1	0	0	32	0	0	-	32	34	2	0	94	100	0				
<u>LONG TERM CARE</u>																				
<u>NURSING HOMES</u>																				
Plentywood	Sheridan	1	1	0	0	27	0	0	-	27	42	15	0							
TOTAL		1	1	0	0	27	0	0	-	27	42	15	0	64	100	0				
<u>DIAGNOSTIC OR</u>																				
<u>TREATMENT CENTERS</u>																				
Plentywood	Sheridan	1	1	0	0															
TOTAL		1	1	0	0									100	100					

PLS-709-7  
RE-167  
FORM APPROVED  
JULY 1967  
OR-R

R-22, Plentywood

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

IDENTIFICATION			NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION										ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING				
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)					
6	7	8	9	10	11	12	13	14		15	16	17	18	
<u>GENERAL HOSPITALS</u>														
Sheridan Memorial	Sheridan	Plentywood	NPA	32	0	0	0	0	-	32	1,078	7,900		
AREA TOTAL				32	0	0	0	0	-	32	1,078	7,900		
<u>LONG-TERM CARE</u>														
<u>NURSING HOMES</u>														
Sheridan Memorial	Sheridan	Plentywood	NPA	27 uc	0	0	0	0	-	27 uc	-----	-----		
AREA TOTAL				27	0	0	0	0	-	27	-----	-----		
uc - Under Construction														

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-23, Roosevelt		Montana			1967			
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED GEN. Col. 9 + 10 LTC. Col. 9 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	11.7	13.0	21,191	1811	65	91		
LONG-TERM CARE FACILITIES	1.10	1.10	24,292	22084	67	84		
AREA NARRATIVE								

This service area consists of Roosevelt County which also includes the greater part of the Fort Peck Indian Reservation. This area is generally rolling country and is served by good highways and railroad. The larger communities are Wolf Point, Poplar, and Culbertson. Industry in the area includes agriculture, livestock raising and oil production.

There are three hospitals in the area with the Roosevelt Memorial Hospital at Culbertson in need of modernization. Due to the high occupancy of the nursing home unit at the Poplar Community Hospital, an additional 19 nursing home beds are programmed at Poplar. The three hospitals serve the Indian and non-Indian bed needs of the area.

1/ Population age 65 and over.



DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER:				4. STATE							
		CURRENT		PROJECTED		CURRENT		PROJECTED		CURRENT		PROJECTED					
R-23, Roosevelt		11,700		13,000		1,100		1,100		1967		1967					
LOCATION		NO. OF FACILITIES						NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				% NEED MET	
CATEGORY	COMMUNITY	TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORMING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUCTION	MODERNIZATION		
							A-B-C	D	STATE STANDARDS								
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
GENERAL HOSPITALS																	
Culbertson Wolf Point Poplar	Roosevelt	1	1	0	1	23	23	0	-	0	22	0	22				
	Roosevelt	1	1	0	0	47	0	0	-	47	47	0	0				
	Roosevelt	1	1	0	0	22	0	0	-	22	22	0	0				
TOTAL		3	3	0	1	92	23	0	0	69	91	0	22	76	76	1	
LONG TERM CARE																	
NURSING HOMES																	
Wolf Point Poplar Culbertson	Roosevelt	1	1	0	0	39	0	0	-	39	39	0	0				
	Roosevelt	1	1	0	0	20	0	0	-	20	39	19	0				
	Roosevelt	1	1	0	1	6	6	0	-	0	6	0	6				
Total		3	3	0	1	65	6	0	-	59	84	19	6	70	91	0	
(continued)																	

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION		3. CIVILIAN POPULATION AGE 65 AND OVER:		4. STATE															
R-23, Roosevelt		CURRENT	PROJECTED	CURRENT	PROJECTED	Montana															
		11,700	13,000	1,100	1,100	1967															
LOCATION		NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED		% NEED MET													
CATEGORY COMMUNITY	NAME OF COUNTY	NO. OF FACILITIES				TOTAL EXISTING	TOTAL NEEDED	CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION								
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED																
														NONCONFORMING							
		FEDERAL STANDARDS				STATE STANDARDS															
		A-B-C				D															
		13				14		15		16		17		18		19		20		21	
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27
DIAGNOSTIC OR TREATMENT CENTERS																					
Culbertson	Roosevelt	1	1	0	1																
Poplar	Roosevelt	1	1	0	0																
Wolf Point	Roosevelt	1	1	0	0																
TOTAL		3	3	0	1									67	67						

IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION										STATISTICS		
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS				
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)							
					A	B	C	D								
6	7	8	9	10	11	12	13	14	15	16	17	18				
<u>GENERAL</u>																
Roosevelt Memorial Trinity Hospital Poplar Community	Roosevelt Roosevelt Roosevelt	Culbertson Wolf Point Poplar	NPA NPA NPA	23 47 22	0 0 0	23 0 0	0 0 0	0 0 0	- - -	0 47 22	417 1,943 1,626	2,338 11,368 7,489				
AREA TOTAL	11700			92	0	23	0	0	-	69	3,986	21,191				
<u>LONG-TERM CARE</u>																
<u>NURSING HOMES</u>																
Faith Lutheran Home Community Hosp. N. Hm. Roosevelt Mem. Hospital	Roosevelt Roosevelt Roosevelt	Wolf Point Poplar Culbertson	NPA NPA NPA	39 20 6	0 0 0	0 0 6	0 0 0	0 0 0	- - -	39 20 Licensed	10 10 11/23/66 NA	14,000 8,556 1,736				
AREA TOTAL				65	0	6	0	0	-	59	20	24,292				

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DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-24, Jordan		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	2.0	1.7	3,179	1,590	7	19		
LONG-TERM CARE FACILITIES	0.22	0.22	-----	13,056	8	19		
AREA NARRATIVE								

This area consists of Garfield County which is generally rolling country. It is served by highway only, there being no railroad in the county, and there is no public transportation. Industry is limited chiefly to agriculture and livestock raising.

The area is served by the Garfield County Hospital at Jordan which is programmed for modernization. There are no long-term care beds in the area at present. Accordingly, 19 beds are programmed, preferably as a nursing home addition to the hospital.

1/ Population age 65 and over.

2/ Use rate of 13,056 is the average of sixteen (16) service areas having reasonable experience.

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER:				4. STATE								
R-24, Jordan		CURRENT		PROJECTED		CURRENT		PROJECTED		Montana								
		2,000		1,700		222		222		1967								
CATEGORY COMMUNITY	LOCATION	NAME OF COUNTY	NO. OF FACILITIES						NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				% NEED MET	
			TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL	EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION		MODERN- IZATION
									A-B-C	D	FEDERAL STANDARDS							
6		7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
GENERAL HOSPITALS																		
Jordan		Garfield	1	1	0	1	20	20	0	-	0	19	0	19				
TOTAL			1	1	0	1	20	20	0	-	0	19	0	19	0	0	1	
LONG-TERM CARE																		
NURSING HOMES																		
Jordan		Garfield	0	1	1	0	0	0	0	-	0	19	19	0				
TOTAL			0	1	1	0	0	0	0	-	0	19	19	0	0	0	0	
DIAGNOSTIC OR																		
TREATMENT CENTERS																		
Jordan		Garfield	1	1	0	1												
TOTAL			1	1	0	1									0	0		

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE **Montana** 2. FISCAL YEAR **1967**

3. AREA **R-24, Jordan** 4. PERIOD COVERED BY INVENTORY **January 1, 1965 - December 31, 1965** 5. Page **1** of **1** pages

IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION								STATISTICS	
TEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS	
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)				
					A	B	C	D					
6	7	8	9	10	11	12	13	14	15	16	17	18	
GENERAL													
Garfield County	Garfield	Jordan	NPA	20	0	20	0	0	-	0	257	3,179	
AREA TOTAL	2,000			20	0	20	0	0	-	0	257	3,179	

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana		3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED	
	CURRENT	PROJECTED							
	4	5							6
GENERAL HOSPITALS	10.6	10.0	13,196	1245	34	53			
LONG-TERM CARE FACILITIES	1.12	1.12	11,852	10,582	33	46			
AREA NARRATIVE									

This area consists of Richland County which is plains area with rolling terrain. It is served by good highways, railroad and air. Chief industries include agriculture, livestock and sugar refining.

The area is served by the Community Memorial Hospital at Sidney which is in need of replacement, and the Richland Homes also at Sidney. While seven (7) long-term care beds are programmed, it is not anticipated that these will be constructed in the immediate future.

1/ Population age 65 and over.



IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING								CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)						
					A	B	C	D							
										11	12	13			
6	7	8	9	10	11	12	13	14	15	16	17	18			
<u>GENERAL</u>															
Community Memorial	Richland	Sidney	NPA	54	0	54	0	0	-	0	2,801	13,196			
AREA TOTAL	10600			54	0	54	0	0	-	0	2,801	13,196			
<u>LONG-TERM CARE</u>															
<u>NURSING HOMES</u>															
Richland Homes	Richland	Sidney	NPA	39	0	0	0	0	-	39	21	11,852			
AREA TOTAL				39	0	0	0	0	-	39	21	11,852			

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# DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR		1967		
R-26, Glendive		Montana						
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED GEN. $\frac{\text{Col. 9}}{.80} + 10$ LTC. $\frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	17.6	20.0	15,037	854	47	69		
LONG-TERM CARE FACILITIES	1.44	1.44	(13,171)	13,056 <sup>21</sup>	52	68		
AREA NARRATIVE								

This area is comprised of Dawson, McCone and Wibaux Counties. This is plains area with good highways, railroad and air service. The larger communities are Glendive, Circle and Bibaux. The industries in the area are agriculture, livestock raising, and oil production.

The area is served by the Glendive Community Hospital at Glendive and the McCone County Hospital at Circle. The Glendive Community Hospital, which was shown as having 55 beds in the previous State Plan, is licensed for 43 beds in the basis of minimum area requirements. Construction is currently under way for a new 46 bed hospital modernization. No facilities are programmed for the community of Wibaux since it is only 8 miles distant to the hospital at Beach, North Dakota.

The area has no conforming beds in the long-term care category. Since the General Nursing Home at Glendive cannot be modernized a new facility should be considered.

1/ Population age 65 and over.

2/ Use rate of 13,056 is the average of sixteen (16) service areas having reasonable experience.

The Glendive Community Hospital at Glendive was formerly operated by the Northern Pacific Beneficial Association and was known as the N.P.B.A. Hospital.

## DEPARTMENT OF

HEALTH EDUCATION AND WELFARE

PUBLIC HEALTH SERVICE

SILVER SPRING, MARYLAND 20910

44-38861-7  
May 2-67

## AREA SUMMARY AND PROGRAM

FORM APPROVED:  
BUDGET BUREAU NO. 69-R897





IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										CONFORMING	ADMISSIONS OR DISCHARGES (Including New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)							
					A	B	C	D	14								
											11	12	13	15			
6	7	8	9	10	11	12	13	14	15	16	17	18					
<u>GENERAL</u> Glendive Community Glendive Community McCone County	Dawson 12600 Dawson McCone 3300	Glendive Glendive Circle	NPA NPA NPA	(43) 46 uc 23	0 0 0	(43) 0 10	0 0 0	0 0 7	- - -	0 46 uc 6	1,688 ----- 81P	10,704 ----- 4,333					
	AREA TOTAL			69	0	10	0	7	-	52	2,506	15,037					
	<u>LONG-TERM CARE</u> <u>NURSING HOMES</u>																
Glendive Comm. Hosp. General Nursing Home	Dawson Dawson	Glendive Glendive	NPA Co.	10 27	0 27	10 0	0 0	0 0	- -	0 0	6 7	3,650 9,521					
	AREA TOTAL			37	27	10	0	0	-	0	13	13,171					
	UC - Under Construction																

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana		3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED GEN. Col. 9 .80 + 10 LTC. Col. 9 .90 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED	
	CURRENT	PROJECTED							
4	5	6	7	8	9	10	11	12	
GENERAL HOSPITALS	6.9	6.2	4,528	656	11	24			
LONG-TERM CARE FACILITIES	0.70 <sup>1/</sup>	0.70 <sup>1/</sup>	9,129	13041.4	25	38			
AREA NARRATIVE									

This area comprised of Rosebud County and the larger part of Treasure County. While this is plains area, it has a rolling terrain. The area is served by good highways and railroad. A portion of the Tongue River Indian Reservation is located in Rosebud County. Industry in the area includes agriculture, livestock raising, coal mining and some lumber production.

The area is served by the Rosebud Community Hospital at Forsyth. This is a 20-bed hospital with a 25-bed nursing home unit. The hospital is in need of replacement of the existing 20 beds and 4 beds to be added. The nursing home unit is in need of modernization.

1/ Population age 65 and over.

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

4. STATE  
Montana

5. FISCAL YEAR

1967

3. CIVILIAN POPULATION AGE 65 AND OVER:

PROJECTED

702

2. TOTAL CIVILIAN POPULATION

PROJECTED

6,200

CURRENT

6,900

R-27, Forsyth

LOCATION

NO. OF FACILITIES

NO. OF BEDS EXISTING

NO. OF BEDS PROGRAMED

% NEED MET

MODERN-  
IZATION

CONSTRUC-  
TION

TO BE  
MODERNIZED

TO BE  
ADDED

TOTAL  
NEEDED

CONFORM-  
ING

STATE  
STANDARDS

FEDERAL  
STANDARDS

D

A-B-C

13

14

15

16

17

18

19

20

21

22

23

24

25

26

6  
CATEGORY  
COMMUNITY

7  
NAME OF  
COUNTY

GENERAL HOSPITALS

Forsyth

Rosebud

TOTAL

LONG TERM CARE

NURSING HOMES

Forsyth

Rosebud

TOTAL

DIAGNOSTIC OR  
TREATMENT CENTERS

Forsyth

Rosebud

TOTAL



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR  
1967

AREA R-27, Forsyth

4. PERIOD COVERED BY INVENTORY  
January 1, 1965 - December 31, 1965

5. Page 1 of 1 pages

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING					CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS				BY STATE STANDARDS (Optional)			
					A	B	C	D				
6	7	8	9	10	11	12	13	14	15	16	17	18
GENERAL	Rosebud Community	Rosebud	Forsyth	NPA	20	0	20	0	0	0	762	4,528
	AREA TOTAL	6200			20	0	20	0	-	0	762	4,528
LONG TERM CARE NURSING HOMES	Rosebud Comm. Hosp. N. Hm.	Rosebud	Forsyth	NPA	25	0	25	0	0	0	45	9,129
	AREA TOTAL				25	0	25	0	-	0	45	9,129

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		3. FISCAL YEAR				
R-28, Broadus		Montana		1967				
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED
	CURRENT	PROJECTED						
4	5	6	7	8	9	10	11	12
GENERAL HOSPITALS	2.5	2.2	(2250) 1/	900	5	16		
LONG-TERM CARE FACILITIES	0.24 2/	0.24 2/	-----	13,056 3/	9	20		
AREA NARRATIVE								

This area consists of Powder River County, which is plains area with rolling terrain. The industry is agriculture and livestock. This is rural area having a population density of 0.8 persons per square mile. It is served by highway only with transportation by private cars. The nearest hospital to Broadus, the County Seat, is Miles City which is 80 miles north; to the east is Belle Fourche, South Dakota, 95 miles away and to the south at Gillette, Wyoming, 90 miles and Hardin to the west, 125 miles. There is no communication with Ekalaka, the county seat of Carter County, which is 110 miles by road from Broadus and part of the road, 80 miles, is dirt and gravel road which is passable only under good weather conditions.

Programmed for construction at Broadus is a small 9 to 16 bed hospital with a 20-bed nursing home unit.

- 1/ Based on utilization of a 10-bed hospital at Chester which serves a population of 2,600.
- 2/ Population age 65 and over.
- 3/ Use rate of 13,056 is the average of sixteen (16) service areas having reasonable experience.

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER:				4. STATE								
R-28, Broadus		CURRENT		PROJECTED		CURRENT		PROJECTED		Montana								
		2,500		2,200		242		242		1967								
LOCATION		NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				% NEED MET				
CATEGORY	COMMUNITY	NAME OF COUNTY	7	8	9	10	11	12	NONCONFORMING				16	17	18	19	20	21
									FEDERAL STANDARDS		15	STATE STANDARDS						
									A-B-C	D								
GENERAL HOSPITALS																		
Broadus		Powder River		0	1	1	0	0	0	0	0	0	0	16	16	0	0	0
TOTAL			0	1	1	1	0	0	0	0	0	0	0	16	16	0	0	0
LONG TERM CARE																		
NURSING HOMES																		
Broadus		Powder River		0	1	1	0	0	0	0	0	0	0	20	20	0	0	0
TOTAL			0	1	1	1	0	0	0	0	0	0	0	20	20	0	0	0
DIAGNOSTIC OR																		
TREATMENT CENTERS																		
Broadus		Powder River		0	1	1	0										0	0
TOTAL			0	1	1	1	0										0	0



AREA R-28, Broadus

4. PERIOD COVERED BY INVENTORY  
January 1, 1965 - December 31, 1965

5. Page 1 of 1 pages

IDENTIFICATION				NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION							STATISTICS	
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING				CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS	
					BY FEDERAL STANDARDS							
					A	B	C	D	BY STATE STANDARDS (Optional)			
6	7	8	9	10	11	12	13	14	15	16	17	18
<u>GENERAL</u>												
None												
<u>LONG TERM CARE</u>												
<u>NURSING HOMES</u>												
None												

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DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana			3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE $\frac{\text{Col. 7}}{\text{Col. 5}}$	PROJECTED ADC $\frac{\text{Col. 6} \times \text{Col. 8}}{365}$	BED NEED $\text{GEN. } \frac{\text{Col. 9}}{.80} + 10$ $\text{LTC. } \frac{\text{Col. 9}}{.90} + 10$	ADJUSTMENT ( <i>Explain in Area Narrative</i> )		ADJUSTED BED NEED	
	CURRENT	PROJECTED								
4	5	6	7	8	9	10	11		12	
GENERAL HOSPITALS	6.4	6.3	7.754	1,212	21	36				
LONG-TERM CARE FACILITIES	0.60	1/ 0.60	(4,083)	13,056	21	33				
AREA NARRATIVE										

This area is comprised of Carter and Fallon Counties and is relatively plains country with a rolling terrain. Fallon County is served by good highways and has bus service while Carter County is served by a north-south highway from Baker to Ekalaka which terminates at Ekalaka, and has no public transportation. Industry in the area is agriculture, livestock raising and oil production.

The area is served by the Fallon County Memorial Hospital at Baker which has 19 beds which were modernized along with the construction of a 24 bed nursing home addition. This was placed into operation on March 1, 1966. A 16-bed hospital at Ekalaka serves Carter County. This facility is currently being modernized in conjunction with the construction of a 21-bed nursing home addition which will replace 12 non-conforming beds and add 9 beds.

No additional construction, or modernization, is programmed for this area.

1/ Population age 65 and over.

2/ Use rate of 13,056 is the average of sixteen (16) service areas having reasonable experience.

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION			3. CIVILIAN POPULATION AGE 65 AND OVER:			4. STATE									
R-29, Baker, Ekalaka		CURRENT	PROJECTED		CURRENT	PROJECTED		Montana									
		6,400	6,300		600	600		1967									
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES				NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				% NEED MET			
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	ADDED TO BE	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION		
							FEDERAL STANDARDS	STATE STANDARDS									
								A-B-C	D							13	14
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	
<u>GENERAL HOSPITALS</u>																	
Baker Ekalaka	Fallon Carter	1 1	1 1	0 0	0 0	19 16	0 0	0 0	- -	19 16	20 16	1 0	0 0				
TOTAL		2	2	0	0	35	0	0	-	35	36	1	0	97	100		0
<u>LONG TERM CARE</u>																	
<u>NURSING HOMES</u>																	
Baker Ekalaka	Fallon Carter	1 1	1 1	0 0	0 0	24 21	0 0	0 0	- -	24 21	19 14	0 0	0 0				
TOTAL		2	2	0	0	45	0	0	-	45	33	0	0	136	136		12
<u>DIAGNOSTIC OR</u>																	
<u>TREATMENT CENTERS</u>																	
Baker Ekalaka	Fallon Carter	1 1	1 1	0 0	0 0												
TOTAL		2	2	0	0									100	100		



DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR

1967

R-29, Baker, Ekalaka

4. PERIOD COVERED BY INVENTORY  
January 1, 1965 - December 31, 1965

5. Page 1 of 1 pages

IDENTIFICATION							NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION								STATISTICS	
CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING				BY STATE STANDARDS (Optional)	CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS				
					BY FEDERAL STANDARDS											
					A	B	C	D								
6	7	8	9	10	11	12	13	14	15	16	17	18				
GENERAL																
Dahl Memorial Fallon Co. Mem.	2400 Carter Fallon 4000	Ekalaka Baker	NPA NPA	16 uc 19	0 0	0 0	0 0	0 0	- -	16 uc 19	297 819	2,059 5,695				
AREA TOTAL				35	0	0	0	0	-	35	1,116	7,754				
LONG-TERM CARE																
NURSING HOMES																
Dahl Memorial Hospital Fallon Co. Hosp.	Carter Fallon	Ekalaka Baker	NPA NPA	21 uc 24	0 0	0 0	0 0	0 0	- -	21 uc 24 1/2	14 --	4,083 -----				
AREA TOTAL				45	0	0	0	0	-	45	14	4,083				
1/ Opened March 1, 1966																
uc - Under Construction																

DETERMINATION OF AREA BED NEED AND AREA NARRATIVE

1. AREA		2. STATE		Montana			3. FISCAL YEAR		1967	
CATEGORY	CIVILIAN POPULATION (In thousands)		PATIENT DAYS (Current)	USE RATE Col. 7 Col. 5	PROJECTED ADC Col. 6 x Col. 8 365	BED NEED GEN. Col. 9 + 10 LTC. Col. 9 + 10	ADJUSTMENT (Explain in Area Narrative)	ADJUSTED BED NEED		
	CURRENT	PROJECTED								
4	5	6	7	8	9	10	11	12		
GENERAL HOSPITALS	15.9	15.2	29,337	1,845	77	106				
LONG-TERM CARE FACILITIES	1.86 1/	1.86 1/	41,924	22,540	115	138				
AREA NARRATIVE										

This area is comprised of Custer and Prairie Counties. This is for the greater part area with relatively good transportation by highway, railroad and air. Industry is largely agriculture, livestock raising and marketing, oil production and trucking.

The area is served by a 135 bed hospital at Miles City which is programmed for modernization, and a 12 bed hospital at Terry which is programmed for replacement. A veteran's Administration Hospital with its usual limitations, is located at Miles City.

In the long-term care category, 61 beds in the Holy Rosary Nursing Home at Miles City are programmed for modernization and 20 beds are to be provided at Terry.

1/ Population age 65 and over.

DEPARTMENT OF  
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PUBLIC HEALTH SERVICE  
SILVER SPRING, MARYLAND 20910

1. AREA		2. TOTAL CIVILIAN POPULATION				3. CIVILIAN POPULATION AGE 65 AND OVER:				4. STATE								
I-7, Miles City, Terry		CURRENT		PROJECTED		CURRENT		PROJECTED		Montana								
		15,900		15,200		1,958		1,858		1967								
CATEGORY COMMUNITY	LOCATION	NO. OF FACILITIES						NO. OF BEDS EXISTING				NO. OF BEDS PROGRAMED				% NEED MET		TOTAL EXISTING BEDS IN AREA
		TOTAL EXISTING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	TOTAL EXISTING	NONCONFORMING			CONFORM- ING	TOTAL NEEDED	TO BE ADDED	TO BE MODERNIZED	CONSTRUC- TION	MODERN- IZATION			
							FEDERAL STANDARDS		STATE STANDARDS									
							A-B-C	D										
6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22		
GENERAL HOSPITALS																		
Miles City Terry	Custer Prairie	1	1	0	1	135	135	0	-	0	94	0	94					
		1	1	0	1	12	12	0	-	0	12	0	12					
TOTAL		2	2	0	2	147	147	0	-	0	106	0	106	0	0	0	41	
LONG TERM CARE																		
NURSING HOMES																		
Miles City Terry	Custer Prairie	2	2	0	1	137	61	0	-	76	118	0	42					
		0	1	1	0	0	0	0	-	0	20	1	19					
TOTAL		2	3	1	1	137	61	0	-	76	138	1	61	55	55		0	
MENTAL FACILITIES																		
	Refer to 1966-1967																	
Miles City	Custer	0	1	1	0	0	0	0	-	0	---	--	0	0	0			
TOTAL		0	1	1	0	0	0	0	-	0	---	--	0	0	0		(continued)	

(continued)





DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE  
**Montana**

2. FISCAL YEAR  
**1967**

4. PERIOD COVERED BY INVENTORY

**I-7, Miles City, Terry**

**January 1, 1965 - December 31, 1965**

5.

Page **1** of **1** pages

IDENTIFICATION

NUMBER OF BEDS, EXISTING AND UNDER CONSTRUCTION

STATISTICS

CATEGORY NAME OF FACILITY	NAME OF COUNTY	NAME OF CITY OR TOWN	CONTROL	TOTAL CAPACITY	NONCONFORMING										CONFORMING	ADMISSIONS OR DISCHARGES (Excluding New-Born)	PATIENT DAYS
					BY FEDERAL STANDARDS					BY STATE STANDARDS (Optional)							
					A	B	C	D	15								
											11	12	13	14			
6	7	8	9	10	11	12	13	14	15	16	17	18					
GENERAL	13600 Custer Prairie 2300	Miles City Terry	NPA NPA	135 12	0 12	135 0	0 0	0 0	- -	0 0	3,933 446	24,223 5,114					
				147	12	135	0	0	-	0	4,379	29,337					
AREA TOTAL																	
LONG TERM CARE NURSING HOMES	Custer Custer	Miles City Miles City	Co. NPA	76 61	0 61	0 0	0 0	0 0	- -	76 0	45 28	24,969 16,956					
				137	61	0	0	0	-	76	73	41,924					
AREA TOTAL																	

CHAPTER V

INVENTORY AND PROGRAM

PUBLIC HEALTH CENTERS, PHS 708-5





1. STATE

Montana

2. FISCAL YEAR

1967

3. Page

1 of 1

Pages

4. PERIOD COVERED BY INVENTORY

January 1, 1965 - December 31, 1965

POLITICAL SUBDIVISION WHICH EXISTING OR PROPOSED FACILITY WILL SERVE	CIVILIAN POPULATION OF POLITICAL SUBDIVISION	NAME OF LOCAL HEALTH UNIT SERVING POLITICAL SUBDIVISION (Shown in Col. 5)	EXISTING FACILITIES						PROGRAMMED FACILITIES		
			CONFORMING		NONCONFORMING FEDERAL		NONCONFORMING STATE		P.H.C.	AUXIL.	AUXIL.
			P.H.C.	AUXIL.	P.H.C.	AUXIL.	P.H.C.	AUXIL.			
5	6	7	8	9	10	11	12	13	14	15	
Missoula Missoula County	46,200	Missoula City-County Health Department	X								
Flathead County	34,200	Flathead County Health Department							A		
Great Falls Cascade County	78,900	Great Falls City-County Health Department	X								
Helena Lewis and Clark County	29,100	City-County Health Depart- ment			X				M		
Butte Silver Bow County	47,200	Silver Bow County Health Department			X				M		
Bozeman Gallatin County	27,100	City-County Health Depart- ment	X								
Billings Yellowstone County	80,200	Yellowstone County Health Department							A		
Hardin Big Horn County	10,000	Big Horn County Health Department			X				M		
NOTE: Other facilities are not programmed at this time pending further study.											
A - New Construction											
M - Modernization											





CHAPTER VI

STATE SUMMARY

AND

AREA PRIORITY LISTS

## STATE SUMMARY AND PROGRAM

## 1. STATE

## Montana

2. FISCAL YEAR

1967

PHS-708-8  
REV. 2-67

\* Available but not being utilized.

DEPARTMENT OF  
HEALTH, EDUCATION, AND WELFARE  
PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE

Montana

2. FISCAL YEAR

1967

3. CATEGORY

GENERAL HOSPITALS

4.

Page 1 of 2 pages

AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE ADDED	NUMBER OF FACILITIES TO BE ADDED
5	6	7	8	9
R-1, Libby	0	A	0	0
R-2, Flathead County	0	A	26	0
R-3, Hot Springs	0	A	7	0
R-5, Hamilton	0	A	8	0
I-1, Missoula, Intermediate	0	A	0	0
R-6, Glacier County	0	A	10	0
R-7, Toole County	0	A	0	0
R-9, Pondera County	0	A	11	0
R-10, Choteau	0	A	0	0
R-12, Bozeman	0	A	0	0
R-13, Lewistown	0	A	0	0
R-14, Harlowton	0	A	3	0
R-16, Livingston	0	A	0	0
R-17, Columbus	0	A	18	0
R-24, Jordan	0	A	0	0
R-25, Sidney	0	A	0	0
R-27, Forsyth	0	A	4	0
R-28, Broadus	0	A	16	1
I-7, Miles City, Terry	0	A	0	0
I-6, Billings, Intermediate	22	A	69	0
R-4, Lake County	26	B	0	0
R-11, Dillon	31	B	9	0
I-3, Havre, Intermediate	40	B	0	0
I-4, Helena, Intermediate	47	B	0	0



DEPARTMENT OF  
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PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE Montana

2. FISCAL YEAR 1967

4. Page 2 of 2 pages

3. CATEGORY

GENERAL HOSPITALS

AREA		PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE ADDED	NUMBER OF FACILITIES TO BE ADDED
5		6	7	8	9
R-20,	Glasgow	64	C	0	0
R-21,	Scobey	67	C	1	0
R-26,	Glendive	75	C	0	0
R-23,	Roosevelt County	76	D	0	0
I-2,	Great Falls, Intermediate	82	D	0	0
R-19,	Hardin	82	D	4	0
R-18,	Red Lodge	90	D	3	0
I-5,	Butte, Intermediate	92	D	12	0
R-15,	Roundup	94	D	1	0
R-22,	Plentywood	94	D	2	0
R-8,	Phillips County	97	D	1	0
R-29,	Baker, Ekalaka	97	D	1	0

DEPARTMENT OF  
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PUBLIC HEALTH SERVICE  
WASHINGTON, D.C. 20201

1. STATE Montana

2. FISCAL YEAR 1967

3. CATEGORY

GENERAL HOSPITALS

4. Page 1 of 2 pages

AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE MODERNIZED	NUMBER OF FACILITIES TO BE MODERNIZED
5	6	7	8	9
R-1, Libby	0	A	30	1
R-2, Flathead County	0	A	102	3
R-3, Hot Springs	0	A	18	1
R-5, Hamilton	0	A	32	1
I-1, Missoula, Intermediate	0	A	321	4
R-6, Glacier County	0	A	44	1
R-7, Toole County	0	A	26	1
R-9, Pondera County	0	A	36	1
R-10, Choteau	0	A	21	1
R-12, Bozeman	0	A	93	1
R-13, Lewistown	0	A	54	1
R-14, Harlowton	0	A	19	1
R-16, Livingston	0	A	58	2
R-17, Columbus	0	A	11	1
R-24, Jordan	0	A	19	1
R-25, Sidney	0	A	53	1
R-27, Forsyth	0	A	20	1
R-28, Broadus	0	A	0	0
I-7, Miles City, Terry	0	A	106	2
R-4, Lake County	26	B	56	2
I-6, Billings, Intermediate	26	B	290	2
R-11, Dillon	38	B	26	2
I-3, Havre, Intermediate	40	B	87	3
I-4, Helena, Intermediate	47	B	103	4

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GENERAL HOSPITALS

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AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE MODERNIZED	NUMBER OF FACILITIES BE MODERNIZED
5	6	7	8	9
R-20, Glasgow	64	C	17	1
R-21, Scobey	70	C	6	1
R-26, Glendive	75	C	17	1
R-23, Roosevelt County	76	D	22	1
I-2, Great Falls, Intermediate	82	D	72	1
I-5, Butte, Intermediate	95	D	21	3
R-8, Phillips County	100	E	0	0
R-15, Roundup	100	E	0	0
R-18, Red Lodge	100	E	0	0
R-19, Hardin	100	E	0	0
R-22, Plentywood	100	E	0	0
R-29, Baker, Ekalaka	100	E	0	0



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LONG-TERM CARE FACILITIES

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AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE ADDED	NUMBER OF FACILITIES TO BE ADDED
5	6	7	8	9
R-1, Libby	0	A	55	0
R-14, Harlowton	0	A	18	0
R-17, Columbus	0	A	5	0
R-19, Hardin	0	A	29	0
R-20, Glasgow	0	A	69	1
R-24, Jordan	0	A	19	1
R-26, Glendive	0	A	31	0
R-27, Forsyth	0	A	13	0
R-28, Broadus	0	A	20	1
R-4, Lake County	28	B	39	0
I-5, Butte, Intermediate	33	B	114	1
R-16, Livingston	35	B	44	0
R-15, Roundup	39	B	25	0
R-18, Red Lodge	42	B	33	0
R-6, Glacier County	45	B	15	0
I-4, Intermediate	52	C	38	1
I-7, Miles City, Terry	55	C	1	1
R-2, Flathead County	59	C	7	0
R-22, Plentywood	64	C	15	0
R-10, Choteau	69	C	13	0
R-21, Scobey	70	C	8	0
R-23, Roosevelt County	70	C	19	0
R-7, Toole County	77	D	10	0
R-8, Phillips County	82	D	7	0

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AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE ADDED	NUMBER OF FACILITIES TO BE ADDED
5	6	7	8	9
R-25, Sidney	85	D	7	0
R-13, Lewistown	89	D	0	0
R-12, Bozeman	94	D	0	0
I-1, Missoula, Intermediate	95	D	0	0
I-3, Havre, Intermediate	110	E	0	0
R-3, Hot Springs	115	E	0	0
I-6, Billings, Intermediate	115	E	0	0
R-9, Pondera County	127	E	0	0
R-29, Baker, Ekalaka	136	E	0	0
I-2, Great Falls, Intermediate	147	E	0	0
R-5, Hamilton	218	E	0	0
R-11, Dillon	220	E	0	0

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LONG-TERM CARE FACILITIES

AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE MODERNIZED	NUMBER OF FACILITIES TO BE MODERNIZED
5	6	7	8	9
R-1, Libby	0	A	10	1
R-14, Harlowton	0	A	12	1
R-17, Columbus	0	A	38	1
R-19, Hardin	0	A	10	1
R-20, Glasgow	0	A	0	0
R-24, Jordan	0	A	0	0
R-26, Glendive	0	A	37	1
R-27, Forsyth	0	A	25	1
R-28, Broadus	0	A	0	0
I-5, Butte, Intermediate	50	B	118	3
I-7, Miles City, Terry	55	C	61	1
R-4, Lake County	55	C	19	1
R-2, Flathead County	62	C	54	1
R-6, Glacier County	65	C	12	1
I-4, Helena, Intermediate	68	C	39	2
R-16, Livingston	68	C	15	1
R-13, Lewistown	89	D	5	1
R-23, Roosevelt County	91	D	6	1
R-12, Bozeman	94	D	6	0
I-1, Missoula, Intermediate	95	D	9	1
R-7, Toole County	100	E	0	0
R-8, Phillips County	100	E	0	0
R-10, Choteau	100	E	0	0
R-15, Roundup	100	E	0	0



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LONG-TERM CARE FACILITIES

AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE MODERNIZED	NUMBER OF FACILITIES TO BE MODERNIZED
5	6	7	8	9
R-18, Red Lodge	100	E	0	0
R-21, Scobey	100	E	0	0
R-22, Plentywood	100	E	0	0
R-25, Sidney	100	E	0	0
I-3, Havre, Intermediate	110	E	0	0
R-3, Hot Springs	115	E	0	0
I-6, Billings, Intermediate	115	E	0	0
R-9, Pondera County	127	E	0	0
R-29, Baker, Ekalaka	136	E	0	0
I-2, Great Falls, Intermediate	147	E	0	0
R-5, Hamilton	218	E	0	0
R-11, Dillon	220	E	0	0

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DIAGNOSTIC OR TREATMENT CENTERS

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AREA		PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE ADDED	NUMBER OF FACILITIES TO BE ADDED
5		6	7	8	9
R-1,	Libby	0	A		0
R-2,	Flathead County	0	A		0
R-3,	Hot Springs	0	A		0
R-5,	Hamilton	0	A		0
I-1,	Missoula, Intermediate	0	A		0
R-6,	Glacier County	0	A		0
R-7,	Toole County	0	A		0
R-9,	Pondera County	0	A		0
R-10,	Choteau	0	A		0
R-12,	Bozeman	0	A		0
I-5,	Butte, Intermediate	0	A		0
R-13,	Lewistown	0	A		0
R-14,	Harlowton	0	A		0
R-16,	Livingston	0	A		0
R-17,	Columbus	0	A		0
R-20,	Glasgow	0	A		0
R-24,	Jordan	0	A		0
R-25,	Sidney	0	A		0
R-27,	Forsyth	0	A		0
R-28,	Broadus	0	A		1
I-7,	Miles City, Terry	0	A		0
I-4,	Helena, Intermediate	20	A		0
I-3,	Havre, Intermediate	25	A		0
R-11,	Dillon	31	B		0

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DIAGNOSTIC OR TREATMENT CENTERS

AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE ADDED	NUMBER OF FACILITIES TO BE ADDED
5	6	7	8	9
R-4, Lake County	33	B		0
R-26, Glendive	50	B		0
R-23, Roosevelt County	70	C		0
I-2, Great Falls, Intermediate	75	C		0
R-8, Phillips County	100	E		0
R-15, Roundup	100	E		0
R-18, Red Lodge	100	E		0
R-19, Hardin	100	E		0
I-6, Billings, Intermediate	100	E		0
R-21, Scobey	100	E		0
R-22, Plentywood	100	E		0
R-29, Baker, Ekalaka	100	E		0



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AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE MODERNIZED	NUMBER OF FACILITIES TO BE MODERNIZED
5	6	7	8	9
R-1, Libby	0	A		1
R-2, Flathead County	0	A		3
R-3, Hot Springs	0	A		1
R-5, Hamilton	0	A		1
I-1, Missoula, Intermediate	0	A		4
R-6, Glacier County	0	A		1
R-7, Toole County	0	A		1
R-9, Pondera County	0	A		1
R-10, Choteau	0	A		1
R-12, Bozeman	0	A		1
R-13, Lewistown	0	A		1
R-14, Harlowton	0	A		1
R-16, Livingston	0	A		2
R-17, Columbus	0	A		1
R-20, Glasgow	0	A		1
R-24, Jordan	0	A		1
R-25, Sidney	0	A		1
R-27, Forsyth	0	A		1
R-28, Broadus	0	A		0
I-7, Miles City, Terry	0	A		2
I-4, Helena, Intermediate	20	A		4
I-3, Havre, Intermediate	25	A		3
R-4, Lake County	33	B		2
R-11, Dillon	33	B		2

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AREA	PERCENT OF NEED MET	PRIORITY	NUMBER OF BEDS TO BE MODERNIZED	NUMBER OF FACILITIES BE MODERNIZED
5	6	7	8	9
I-5, Butte, Intermediate	40	B		3
R-26, Glendive	50	B		1
R-23, Roosevelt County	67	C		1
I-2, Great Falls, Intermediate	75	C		1
R-8, Phillips County	100	E		0
R-15, Roundup	100	E		0
R-18, Red Lodge	100	E		0
R-19, Hardin	100	E		0
I-6, Billings, Intermediate	100	E		0
R-21, Scobey	100	E		0
R-22, Plentywood	100	E		0
R-29, Baker, Ekalaka	100	E		0

## CHAPTER VII

### INVENTORY OF OUTPATIENT FACILITIES

- (1) DIAGNOSTIC OR TREATMENT CENTERS, PHS 708-3
- (2) REHABILITATION FACILITIES, PHS 708-4





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AREA	NAME OF FACILITY	COUNTY	CITY OR TOWN	VISITS DURING YEAR	SERVICES												CLASSIFICATION			
					GENERAL	CANCER	DENTAL	MENTAL HYGIENE	ORTHOPEDIC	SPECIAL				DIAGNOS- TIC		HOSPITAL O.P.D.	CONFORMING	FEDERAL	NONCON- FORMING	
										T. B.	OTHER	X-RAY	CLINICAL LABORATORY	STATE						
															9					10
5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23		
R-1	St. John's Lutheran	Lincoln	Libby	NPA	4,220	X								X			X			
R-2	Whitefish Memorial	Flathead	Whitefish	NPA	1,255	X								X			X			
R-2	Kalispell General	Flathead	Kalispell	NPA	5,271	X								X			X			
R-2	Flathead County	Flathead	Kalispell	Co.	241	X								X			X			
R-3	Sanders County General	Sanders	Hot Springs	NPA	1,971	X								X			X			
R-4	St. Joseph's Hospital	Lake	Polson	NPA	1,629	X								X			X			
R-4	St. Luke	Lake	Ronan	NPA	728	X								X			X			
R-4	Holy Family	Lake	St. Ignatius	NPA	1,947	X								X			X			
R-5	Marcus Daly Hospital	Ravalli	Hamilton	NPA	1,088	X								X			X			
I-1	Mineral Hospital	Mineral	Superior	Prop	775	X								X			X			
I-1	Community Hospital	Missoula	Missoula	NPA	3,234	X								X			X			
I-1	NPBA Hospital	Missoula	Missoula	NPA	13,349	X								X			X			
I-1	St. Patrick's Hospital	Missoula	Missoula	NPA	13,242	X								X			X			
R-6	Glacier County Memorial	Glacier	Cut Bank	NPA	1,154	X								X			X			
R-7	Toole County Hospital	Toole	Shelby	NPA	1,344	X								X			X			
R-8	Malta Hospital	Phillips	Malta	NPA	373	X								X			X			
R-9	St. Mary's Hospital	Pondera	Conrad	NPA	2,507	X								X			X			
R-10	Teton Memorial	Teton	Choteau	NPA	552	X								X			X			

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AREA	NAME OF FACILITY	COUNTY	CITY OR TOWN	CONTROL	VISITS DURING YEAR							SERVICES											CLASSIFICATION																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
					10	11	12	13	14	15	16	SPECIAL				DIAGNOSTIC			HOSPITAL O.P.D.	CONFORMING	21	22	23																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
												GENERAL	CANCER	DENTAL	MENTAL	HYGIENE	ORTHOPEDIC	T. B.						OTHER	X-RAY	CLINICAL	LABORATORY																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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I-2	Cascade Co. Conv. Hosp.	Cascade	Great Falls	Co	5,753	X		X					X	X	X	X																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																				</

\* Services in Doctor's Clinic



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				9	10	11	GENERAL						SPECIAL						HOSPITAL O.P.D.	CONFIRMING	INTERNAL	NONCONFIRMING
							CANCER	DENTAL	MENTAL HYGIENE	ORTHOPEDIC	T. B.	OTHER	X-RAY	DIAGNOSTIC								
														12	13	14	15	16				
5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23				
R-13	St. Joseph Hospital	Fergus	Lewistown	NPA	3,205	X	X								X							
R-14	Wheatland Memorial	Wheatland	Harlowton	NPA	1,367	X									X							
R-15	Roundup Memorial Hosp.	Musselshell	Roundup	NPA	1,282	X									X							
R-16	Livingston Mem. Hosp.	Park	Livingston	NPA	1,147	X									X							
R-16	Sweet Grass Community	Sweet Grs.	Big Timber	NPA	2,073	X									X							
R-17	Stillwater Memorial Hosp.	Stillwater	Columbus	NPA	478	X									X							
R-18	Carbon County Mem. Hosp.	Carbon	Red Lodge	NPA	809	X									X							
R-19	Big Horn Comm. Hospital	Big Horn	Hardin	NPA	1,029	X									X							
I-6	Billings Deaconess Hosp.	Yellowstone	Billings																			
I-6	St. Vincent Hospital	Yellowstone	Billings																			
R-20	Frances Mahon Deaconess	Valley	Glasgow	NPA	1,568	X									X							
R-21	Daniels Memorial Hosp.	Daniels	Scobey	NPA	548	X									X							
R-22	Sheridan Memorial Hosp.	Sheridan	Plentywood	NPA	301	X									X							
R-23	Trinity Hospital	Roosevelt	Wolf Point	NPA	446	X									X							
R-23	Poplar Community Hosp.	Roosevelt	Poplar	NPA	2,430	X									X							
R-23	Roosevelt Memorial Hosp.	Roosevelt	Culbertson	NPA	149	X									X							

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AREA	NAME OF FACILITY	COUNTY	CITY OR TOWN	CONTROL	VISITS DURING YEAR	SERVICES												CLASSIFICATION				
						GENERAL						SPECIAL						DIAGNOSTIC		CONFORMING	FEDERAL	STATE
						CANCER	DENTAL	MENTAL	HYGIENE	ORTHOPEDIC	T. B.	OTHER	X-RAY	CLINICAL LABORATORY	HOSPITAL O.P.D.							
5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23				
R-24	Garfield County Hosp.	Garfield	Jordan	NPA	161	X								X			X					
R-25	Community Memorial Hosp.	Richland	Sidney	NPA	1,620	X								X			X					
R-26	Glendive Community Hosp.	Dawson	Glendive	NPA	2,017	X								X			X					
R-26	McCone County Hospital	McCone	Circle	NPA	571	X								X			X					
R-27	Rosebud Community Hosp.	Rosebud	Forsyth	NPA	1,555									X			X					
R-29	Fallon County Hospital	Fallon	Baker	NPA	1,933	X								X			X					
R-29	Dahl Memorial Hospital	Carter	Ekalaka	NPA	519	X								X			X					
I-7	Prairie Community Hosp.	Prairie	Terry	NPA	173	X								X			X					
I-7	Holy Rosary Hospital	Custer	Miles City	NPA	2,492	X							X	X			X					

ATTACHMENT TO PHS-708-3 INVENTORY

Other Services. Where indicated in Column 17, the Special Services include one or more of the following:

1. Physical Therapy
2. Occupational Therapy
3. Tumor
4. Cardiac
5. Prenatal
6. Postnatal
7. Venereal Disease
8. Pharmacy
9. Occupational Therapy
10. EKG
11. BMR
12. EENT
13. Deep Therapy
14. Diabetic
15. Shock Therapy



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4. PERIOD COVERED BY INVENTOR																									January 1, 1965 - December 31, 1965																								
5. MEDICAL																									6. NAME OF FACILITY																								
7. LOCATION																									8. CLASSIFICATION																								
9. CONTROL																									10. AVERAGE DAILY CASE-LOAD																								
11. NUMBER OF INDIVIDUALS SERVED DURING YEAR																									12. AGE GROUPS SERVED																								
13. DISABILITY GROUPS SERVED																									14. SERVICES																								
15. MEDICAL																									16. PSYCHOLOGICAL																								
17. SOCIAL																									18. VOCATIONAL																								
19. OTHER																									20. MEDICAL																								
21. NEUROLOGICAL																									22. PSYCHOLOGICAL																								
23. ORTHOPEDIC																									24. MEDICAL																								
25. CARDIAC																									26. PSYCHOLOGICAL																								
27. T. B.																									28. MEDICAL																								
29. BLIND																									30. PSYCHOLOGICAL																								
31. DEAF																									32. MEDICAL																								
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CHAPTER VII

SUMMARY OF CONSTRUCTION PROGRAM





## SUMMARY OF CONSTRUCTION PROGRAM

Under the provisions of Title VI of the Public Health Service Act enacted in 1946, Federal funds have been allocated annually to the States and made available to local public and nonprofit sponsors on a national basis for survey of existing hospitals and for construction of hospitals and public health centers. Part C of the Act pertained to the construction of hospitals and related facilities.

The law required that a single state agency be designated to administer the program and that a state advisory council be appointed.

Prior to receiving Federal funds for construction, each state must develop a State Plan for construction based on standards and definitions set forth in the Act and the Public Health Service Regulations, and on specific needs within the State as determined by surveys of existing facilities. It is required that this Plan be revised each year to reflect changing conditions, refinements in planning, and to include all new construction of hospital facilities. This part of the previous Plans under the original Act was referred to throughout the Plan as "Part C."

Annual allotments of Federal funds to Montana for hospital construction under Part C have been as follows:

Fiscal Year 1948 . . . . .	\$231,530
Fiscal Year 1949 . . . . .	224,137
Fiscal Year 1950 . . . . .	345,499
Fiscal Year 1951 . . . . .	200,000
Fiscal Year 1952 . . . . .	207,113
Fiscal Year 1953 . . . . .	200,000
Fiscal Year 1954 . . . . .	200,000
Fiscal Year 1955 . . . . .	228,439
Fiscal Year 1956 . . . . .	296,113
Fiscal Year 1957 . . . . .	342,194
Fiscal Year 1958 . . . . .	353,850
Fiscal Year 1959 . . . . .	551,056
Fiscal Year 1960 . . . . .	598,392
Fiscal Year 1961 . . . . .	572,790
Fiscal Year 1962 . . . . .	593,365
Fiscal Year 1963 . . . . .	587,692
Fiscal Year 1964 . . . . .	639,078

Public Law 482 of the 83d Congress (July 12, 1954) amended Title VI of the Public Health Service Act by adding Part G for the construction of diagnostic or treatment centers, chronic disease hospitals, rehabilitation facilities and nursing homes. This part of the previous Plans was referred to throughout the Plan as "Part G."

Allotments for construction made available to Montana under Part G of the program for each of the 1955, 1956, 1957, 1958, 1959, 1960 and 1961 fiscal year appropriations were as follows:

Diagnostic or Treatment Centers . . . . .	\$100,000
Facilities for Chronically Ill. . . . .	100,000
Rehabilitation Facilities . . . . .	50,000
Nursing Homes . . . . .	50,000

Fiscal Years 1962, 1963, and 1964

Diagnostic or Treatment Centers . . . . .	\$100,000
Facilities for Chronically Ill. . . . .	100,000
Rehabilitation Facilities . . . . .	50,000
Nursing Homes . . . . .	100,000

The Hospital and Medical Facilities Amendments of 1964, Public Law 88-443, extended the program through June 30, 1969 and in addition to new construction, provides for the modernization of hospitals and other medical facilities. The amended Act combines the categories of facilities for chronically ill and nursing homes under the term "facility for long-term care."

Allotments to Montana under the amended Act are:

	<u>FISCAL YEAR</u>		
	<u>1965</u>	<u>1966</u>	<u>1967</u>
Hospitals & Public Health Centers			
Construction	\$638,930	\$581,300	\$559,906
Modernization	--- ---	200,000	200,000
Long-Term Care	200,000	288,294	287,915
Diagnostic or Treatment Centers	100,000	100,000	100,000
Rehabilitation Facilities	50,000	50,000	50,000

PROJECTS INCLUDED IN PROGRAM TO DATE

Project No.	Facility	Location	Type	No. of Beds	Total Est. Cost	Est. Fed. Share	Status
M-1	Fallon Co. Hospital	Baker	General	19 New	\$301,600.00	\$117,730.41	Opened 6/24/53
M-2	Toole Co. Hospital	Shelby	General	20 New	335,066.46	111,688.82	" 4/20/51
M-3	McCone Co. Hospital	Circle	General	10 New	170,462.07	55,414.02	" 4/05/51
M-4	Teton Memorial Hospital	Choteau	General	25 New	208,492.36	67,202.34	" 6/28/51
M-5	Sweet Grass Comm. Hospital	Big Timber	General	10 New	162,851.07	54,283.69	" 9/20/50
M-6	Glacier Co. Mem. Hospital	Cut Bank	General	36 New	307,173.47	101,404.72	" 5/21/49
M-7	Malta Hospital	Malta	General	30 New	263,407.08	111,710.94	" 12/10/51
M-8	Garfield Co. Hospital	Jordan	General	17 New	256,011.96	107,759.84	" 8/01/51
M-9	Carbon Co. Mem. Hospital	Red Lodge	General	26 New	324,544.39	106,648.13	" 5/09/51
M-10	Livingston Comm. Hospital	Livingston	General	52 New	692,213.26	276,216.54	" 2/28/55
M-11	Daniels Mem. Hospital	Scobey	General	17 New	263,497.51	111,749.29	" 4/08/52
M-12	Granite Co. Hospital	Phillipsburg	General	10 New	223,870.15	93,489.76	" 2/17/53
M-13	Wheatland Mem. Hospital	Harlowton	General	15 New	271,503.30	49,850.80	" 5/01/51
M-14	Sanders Co. Hospital	Hot Springs	General	19 New	255,138.42	60,000.00	" 4/14/52
M-15	Roosevelt Mem. Hospital	Culbertson	General	10 New	99,859.69	36,642.16	" 4/02/51
M-16	Sheridan Mem. Hospital	Plentywood	General	21 New	252,703.09	50,000.00	" 2/27/53
M-17	St. John's Lutheran Hospital	Libby	General	26 New	313,693.66	30,326.26	" 7/01/52
M-18	Roundup Mem. Hospital	Roundup	General	18 New	229,564.21	75,116.27	" 2/02/54
M-19	Columbus Hospital	Gt. Falls	General	Lab. Alter	60,771.29	15,000.00	" 4/02/55



PROJECTS INCLUDED IN PROGRAM TO DATE (Continued)

<u>Project No.</u>	<u>Facility</u>	<u>Location</u>	<u>Type</u>	<u>No. of Beds</u>	<u>Total Est. Cost</u>	<u>Est. Fed. Share</u>	<u>Status</u>
M-20	St. Ann's Hospital	Anaconda	General	37 Addn.	\$1,540,775.74	\$ 138,621.25	Opened 6/18/55
M-21	State Lab. Bldg. (Virus Lab)	Helena	Lab.	Serv. New	1,239,558.26	148,382.00	" 8/01/58
M-22	St. John's Hospital	Helena	General	Serv. Addn & Remodel	285,757.11	111,502.73	" 10/01/58
M-23	Teton Memorial Hospital	Choteau	General	3 Addn.	23,614.72	9,445.89	" 5/06/58
M-24	St. Peter's Hospital	Helena	General	20 Addn.	352,861.04	141,144.42	" 12/15/57
M-25	Rosebud Nursing Home	Forsyth	Nurs Hm	16 New	195,853.30	68,527.94	" 5/01/58
M-26	St. Vincent Hospital	Billings	D & T Chronic Rehab.	Serv. Addn 13 New Serv. - Addn	68,543.08 1,121,933.92 106,134.91	72,154.53 106,134.91	" 8/01/60
M-27	Immanuel Lutheran Home	Kalispell	Nurs Hm	70 New	526,393.99	198,377.49	" 8/25/57
M-28	Dahl Memorial Hospital	Ekalaka	General	16 New	208,890.54	81,527.52	" 11/01/57
M-29	Hotel Dieu Hospital (St. Joseph's Hospital)	Polson	General	40 New 1/	896,080.04	283,798.11	" 11/22/59
M-30	Toole Co. Nursing Home	Shelby	Nurs Hm	34 New Adn.	312,935.55	124,771.02	" 10/05/60
M-31	Liberty Co. Nursing Home	Chester	Nurs Hm	10 New Adn.	129,594.89	49,861.30	" 7/01/58
M-32	St. Clare Hospital	Ft. Benton	General	19 New		118,908.24	
			Nurs Hm	16 New	465,393.10	67,249.28	" 8/29/59
M-33	Big Horn Co. Comm Hospital	Hardin	General Nurs Hm	14 New 10 New	354,061.12	108,119.14	" 10/05/59
M-34	St. John's Lutheran Hospital	Libby	General	4 New Addn	65,646.83	25,929.91	" 5/01/58
M-35	Silver Bow General Hospital	Butte	Chronic General	114 New 28 New	2,404,017.79	398,795.20	" 7/11/60

## PROJECTS INCLUDED IN PROGRAM TO DATE (Continued)

<u>Project No.</u>	<u>Facility</u>	<u>Location</u>	<u>Type</u>	<u>No. of Beds</u>	<u>Total Est. Cost</u>	<u>Est. Fed. Share</u>	<u>Status</u>
M-36	Cascade Co. Conv. Hospital	St. Falls	PH Center Chronic Nurs Hm	Serv. 80 New 72 New	\$2,317,684.19	\$ 328,500.00	Opened 2/26/61
						165,599.71	
M-37	Poplar Comm. Hospital	Poplar	General Nurs Hm	22 New <u>2/</u> 20 New	665,802.87	81,402.85 77,557.55	" 8/22/61
M-38	Trinity Hospital	Wolf Point	General	29 New <u>3/</u>	554,304.62	169,424.73	" 2/91/61
M-39	Deaconess Hospital	Billings	General	84 New Addnl	527,038.01	450,000.00	" 8/18/61
M-40	St. Vincent Hospital	Billings	Rehab.	14 New Addn	106,235.64	42,442.08	" 2/28/60
M-41	St. Clare Hospital	Ft. Benton	Nurs. Res.	12 New	104,069.69	39,650.00	" 12/23/60
M-42	Montana Deaconess Hospital	Gt. Falls	General Mental D & T Nurs Hm	159 New 24 New 108 Remd	5,065,605.00	1,426,176.00	" 3/14/65*
						125,013.00 320,152.82	" 2/01/66*
M-43	Columbus Hospital	Gt. Falls	Nurs Res Sch of Nurs	New	1,469,274.07	583,573.64	" 9/18/63
M-44	Faith Lutheran Home	Wolf Point	Nurs Hm	40 New	520,158.91	146,440.18	" 8/01/62
M-45	Miles City Nurs. Home	Miles City	Nurs Hm	52 New	481,233.70	185,761.74	" 10/01/62
M-46	Holy Family Hospital	St. Ignatius	General Nurs Hm	20 New <u>4/</u> 10 New	931,658.87	138,150.50 80,268.24	" 11/25/62
M-47	St. Vincent Hospital	Billings	General	Remodel.	265,712.79	101,215.69	" 5/25/62
M-48	Ruby Valley Hospital	Sheridan	General	9 New	177,702.60	71,081.04	" 4/06/64

\*Project Not Officially Closed

1/ Includes 8 beds for the Indian population as provided under PL 85-151.

2/ Includes 13 beds for the Indian population as provided under PL 85-151.

3/ Includes 8 beds for the Indian Population as provided under PL 85-151.

4/ Includes 12 beds for the Indian population as provided under PL 85-151.

PROJECTS INCLUDED IN PROGRAM TO DATE (Continued)

Project No.	Facility	Location	Type	No. of Beds	Total Est. Cost	Est. Fed. Share	Status
M-49	Powell Co. Mem. Hospital	Deer Lodge	General	35 New	\$ 567,556.90	\$ 224,039.21	Opened 7/20/65
M-50	St. John's Hospital	Helena	General Nurs Hm	10 Addn 25 New	401,912.21 333,457.48	160,764.88 133,382.95	" 11/17/65*
M-51	Fallon County Hospital	Baker	Nurs Hm	24 New	367,500.00	147,000.00	" 3/01/66
APWM-52	St. James Community	Butte	Nurs Res		602,395.33	5/ 208,430.00	" 3/10/65
M-53	Sweet Grass County Home For Aged	Big Timber	Nurs Hm	25 New	293,266.00	95,370.00	" 7/1/65
APWM-54	Kalispell Gen. Hospital	Kalispell	Nurs Res & Remodel.		301,345.51	155,865.00	" 8/20/64
M-55	Roundup Memorial Hospital	Roundup	Nurs Hm	16 New	217,404.00	86,962.00	Under Construc.
M-56	Teton Co. Nursing Home	Choteau	Nurs Hm	29 New	319,715.00	127,886.00	Under Construc.
M-57	Lutheran Home of the Good Shepherd	Havre	Nurs Hm	50 New	881,697.00	306,262.00	Opened 2/01/67
M-58	St. Peter's Hospital	Helena	General Mental Nurs. Hm	82 New 10 New 19 New	3,288,184.00	1,352,162.00 163,608.00	Under Construc.
M-59	Sheridan Memorial Hospital	Plentywood	Moderniz Nurs Hm	27 New	458,848.00	183,539.20	Under Construc.
M-60	Dahl Memorial Hospital	Ekalaka	Moderniz Nurs Hm	21 New	233,125.00	93,250.00	Under Construc.
M-62	Glendive Community Hospital	Glendive	General	46 New	1,204,200.00	482,080.00	Under Construc.
M-64	Carbon Co. Mem. Hospital	Red Lodge	Moderniz Nurs Hm	24 New	480,702.00	192,280.80	Under Construc.

\*Project Not Officially Closed.  
Federal funds from Accelerated Public Works Program.



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